

UN Staff Member calls out Secretary- General on 5G

PREVIOUS
The Problems of 5G, A.I.
and the Meta-Solution of
Consciousness

NEXT
Is 5G The Asbestos Of The
21st Century?

António Guterres
Secretary-General, United Nations

5G

UN Staff Member: 5G Is War on Humanity

January 4, 2019 / Claire Edwards

International Appeal

Stop 5G on Earth and in Space

Warning: do NOT sign the Appeal



To the UN, WHO, EU, Council of Europe and governments of all nations,

We the undersigned scientists, doctors, environmental organizations and citizens from () countries, urgently call for a halt to the deployment of the 5G (fifth generation) wireless network, including 5G from space satellites. 5G will massively increase exposure to radio

Today I am going to present this groundbreaking report. It was handed to me three weeks ago and I have spent the last three weeks translating its 156 pages, finishing last night. Now, with supplementary information, the report is approximately 166 pages long. I will read out what I consider to be the most important extracts, which people need to understand.

I warn you in advance that, when I was translating this document, I was sometimes nauseated and sometimes had to leave the computer to weep over the information it contains. You may have a similar reaction. If you are a normal human being and not a psychopath, many emotions will arise as you hear this information: shock, horror, anger, rage, grief, sorrow.

But do not run away from this. Feel it. Remember that we who understand the situation have a duty to inform ourselves and others at this unique time in the whole of human history. All the more so because the situation now is urgent. Having looked at the legal arrangements put in place in different countries under the so-called Covid emergency measures, and the rollout of 5G and Wigig at 60 GHz during the lockdown, I am satisfied that the so-called second wave will be done through an attack on our children. I know from my discussions with Lena Pu that the Wigig weapon has already been deployed against at least one school in the US.

The authors themselves deal with this and I will start by reading what they have said.

9. THE PSYCHOLOGICAL DIMENSION

Certain confusing aspects of this issue, added to the fact that the artificial nature of this virus has been widely discussed, have resulted in severe criticism of the management of this health crisis. The word treason has been used and an undeniable suspicion has set in towards leaders held responsible for the fate of populations.

However, no matter how legitimate the anger may be, it is important to state on the subject we are dealing with here that these emotions literally poison the environment of their author and rebound on him or her loaded with the potential for self-destruction. It is the same with emotions of fear. This is what folk wisdom calls "making bad blood". And so it is also with anger, which also opens the door to disease.

Stress results in a constantly high level of cortisol and a leakage of minerals.

In addition to the usual psychosomatic disorders (depression, migraines, blood pressure, skin diseases – eczema, psoriasis – heart problems, respiratory disorders, gastric disorders, some liver disorders), oxidative stress represents a real danger to health. It promotes the aging of cells. Cancer is an emotional disease; it often appears as a result of an "intense and permanent conflict" or as a result of emotional shock (grief, separation, loss of employment).

That is why it is essential to be alert to what these events arouse in us.

In addition, anti-oxidants help to combat free radicals generated by stress. The main antioxidants are: bioflavonoids (quercetin), carotenoids, vitamins C and E, and selenium.

Whatever the scale of our challenges, let us remember that a small flame is enough to dispel the darkness of a room. And that little flame is in us.

In the darkest hours of human history, hope has always stood as a bulwark against defeatism. Today, this hope is called trust in life.

Our body is more resilient than we think, and we are full of unexpected strength, provided we keep a positive mindset.

FINDINGS OF THE INVESTIGATIVE REPORT¹
ON THE COVID-19 PANDEMIC AND ITS RELATIONSHIP TO SARS-COV-2 AND
OTHER FACTORS
(FRENCH RESERVE ARMY OFFICERS)
13 May 2020

This is a unique and precious document. It is both:

- A guide to the silent and hidden war that has been launched on humanity, and
- A survival handbook.

I urge you to read this document in its entirety. It may save your life and the lives of your loved ones.

To my knowledge, it is the only official report written on the Covid scamdemic and it makes horrifying reading. It was written by a group of French army reserve officers and their conclusions are unequivocal.

The person who passed it to me has checked its origins and has provided credible assurances of its genuineness. It was banned from publication, but the officers wanted it to be in public hands and therefore redacted it to suppress their names, professions, ranks and affiliation, and passed it on to those who could publicize it.

You will find it available on the Internet after this broadcast, at Gnosis Unity, Radiation Dangers, Guy Bouliaue and other websites with whose owners I have shared it. Anyone who does NOT post this document is either controlled opposition, compromised or they lack the capacity to understand the grave import of its contents. *Ye shall know them by their fruits.*

I have translated all 156 pages of it, and provided equivalent English references to the French references included. I have also added some relevant supplementary information.

When you read this document, you will understand that it could have been written only by professional, well-informed and educated people. In my view, they include doctors, lawyers and war experts. They clearly had access to people who are aware of the “unavowable” purposes of the perpetrators of this scamdemic.

I acknowledge and thank the Reserve Army Officers for their invaluable contribution and call upon all humans serving in the army and the police everywhere to join the side of the people.

Before addressing the contents of the document and the observations, conclusions and recommendations of the Investigation Group, I want to start with a summary of an interview with Valérie Bugault included in the report because it provides very clear insights into the background to the scamdemic and its solution.

I have adapted the contents of the interview and added some supplementary explanatory information.

Valérie Bugault is a doctor of private law from the Panthéon-Sorbonne University and a lawyer. Since 2009, she has ceased her activities as a lawyer to devote herself to disseminating the results of her extensive research work to the public. Today she is an

¹ Investigative report on the Covid-19 pandemic and its relationship to SARS-CoV-2 and other factors. Association of French Reserve Army Officers. French original: [Rapport d'enquête d'un groupe d'officiers de réserve sur la pandémie de COVID-19 et ses liens avec le SARS-CoV-2 et d'autres facteurs](#).

analyst in geopolitics (economic, legal and monetary) and a lecturer. Her research subjects are institutions – national and international – currency, business, law and the functioning of the global economy.

THE FATE OF PEOPLES NOW RESTS IN THEIR HANDS²

Since the early 20th century, the US and its allies have been governed by a cartel of companies led by the main global investment banks, which have their headquarters in the City of London. Western states were privatized when the control of their currencies fell into the hands of private bankers, which explains the emergence of European institutions, which are only the political formalization of this capture of the rules of organization of peoples by private interests.³

We are dealing globally with an unprecedented situation, in which a small group of people, hidden behind the anonymity of capital and international institutions and led by a few private bankers, organize shocks or take advantage of shocks⁴ in order to advance their global agenda of taking political control of the world by instituting a "global government".

Most countries see no further justification for the dollar as the world's reserve currency. Having been taken off the gold standard in 1971 and made into a fiat currency, the dollar is now being delinked from oil. This is why President Trump has merged the Federal Reserve and the Treasury Department. The aim is to create two types of dollar on the model of the Chinese Yuan and Renminbi: an internal dollar and a currency dollar that will circulate in international markets. The global debt is about \$4 quadrillion. The best way to write off that amount of money is what is called *force majeure*.⁵ The monetary reset is upon us; hence the World Economic Forum's "Great Reset".⁶ The arrival of the "coronavirus" therefore appears somewhat fortuitous.

The end of the dollar as an international currency is the sine qua non for a sustainable world currency, at least according to the criteria of economic and monetary functioning imposed by international bankers. The end of the dollar world currency presupposes the end of the hegemony of the American empire.

A sustainable world currency, controlled by the bankers, will soon be able to emerge in the form of a basket of currencies, which will circulate completely digitally. Brexit was initiated by the bankers of the City of London in order to have full freedom of action, free of the institutional burdens of the EU, to drive the change in world currency.

The coronavirus is a case of [social engineering and governance through chaos](#). It is the same modus operandi as with the "terrorist threat": a mixture of real and fiction, combined with two well-known stratagems:

1. The pyromaniac firefighter.
2. The [Karpman triangle](#) or the role-playing persecutor / victim / rescuer.

² This article consists mainly of an abbreviated translation by the author of an interview conducted by *Strategika* with Valérie Bugault, together with some supplementary information. <https://strategika.fr/2020/04/15/geopolitique-du-coronavirus-entretien-avec-valerie-bugault/>.

³ UK Common law—A lawful rebellion; Governments are corporations; The "Corporate Coup d'État"; Robert F Kennedy Jr. - Corporatism is using vaccines to turn Americans into commodities; PLANDEMIC: COVID-19 and the Corporate Coup d'État.

⁴ Naomi Klein. *Shock Doctrine: The Rise of Disaster Capitalism*. 2007.

⁵ Daniel Estulin: 90% of businesses will fail. 90% of people won't have a job. Forbidden Knowledge. <https://forbiddenknowledge.net/what-happened-to-daniel-estulin-an-event-of-our-own/>.

⁶ Spiro Skouras. The Great Reset Plan Revealed: How COVID Ushers In The New World Order. <https://www.youtube.com/watch?v=X6pzXrEBqR0>.

Power allows the crisis situation to happen, or even helps it happen, purposefully or accidentally. Power occupies the place of the *pyromaniac*, therefore the *persecutor*. Then, once the crisis has happened and is in progress, power presents itself as the *rescuer*, who will therefore save us from the crisis that it arranged itself.

We are facing a kind of global cognitive dissonance because we are given contradictory official explanations about what we are facing, which prevent our understanding the whole phenomenon. [Hannah Arendt](#) has described how totalitarian regimes take “total” power over individuals by showering them with contradictory information until they have no way of knowing where the truth lies. “Coronavirus” is a psychological operation using the “Alice in Wonderland” interrogation technique.⁷ Knowledge is compartmentalized so that everyone looks in the wrong direction.

In order to be able to make sense of the situation, you need to bring order to the facts of the case, which are as follows:

- Wuhan – appearance of the virus
- Alarmist news reports
- The virus spreads around the world
- Populations are locked down
- Hospital services “choke” under the influx.

If one takes the trouble to take into account all these elements, a clear picture emerges. The World Health Organization (WHO), government and media actions are contrary to the stated aim of protecting populations. They are playing the role of pyromaniac firefighters. They:

- Ban proposed and successful, long-existing treatments
- Lock down populations instead of encouraging herd immunity (as in Sweden), but ignore areas of lawlessness, migrant camps, Black Lives Matter riots
- Destroy the world economy, thereby promoting unemployment, social disintegration and poor mental health
- Ban people from leaving home or going far from home to exercise, thereby damaging their health
- Promote ventilators through financial subsidies, which kill the patients
- Issue orders to triage the elderly to their deaths
- Falsify statistics by attributing all deaths to “Covid”,
- Put out confusing information about masks being useless, and then masks being compulsory
- Refuse authorizations to researchers offering tests to detect coronavirus infection
- Refuse help from industrialists willing to manufacture respirators
- Empty prisons (UN directive) but threaten with imprisonment lawful citizens leaving home without authorization.

The media – and most of the alternative media – are owned and controlled by the power elite.⁸ They:

- Terrify the public with false statistics, images of coffins and fake stories about overwhelmed hospitals

⁷ [Alice in Wonderland Technique: The Power of Applied Confusion.](#)

⁸ George Soros: Media mogul: executive summary. www.mrc.org/special-reports/george-soros-media-mogul-executive-summary. Top journalists that serve on Soros-funded boards of directors or advisers. www.mrc.org/special-reports/top-journalists-serve-soros-funded-boards-directors-or-advisers.

- Promote rent-a-doctors connected to the pharmaceutical lobbies
- Censor information from frontline doctors about treatments, and information about the dangers of the proposed vaccine
- Censor all dissenting views on the cause of “pandemic”, the nature of the “virus”, and potential cures
- Promote expensive, ineffective treatments and the Bill Gates/GAVI vaccine.

Two things are clear:

- Behind the apparent commitment to protect populations hides a duplicitous desire to engineer them into a state of shock and mass-monitor them
- The developing social anarchy is deliberately organized by the public authorities themselves, under the false pretext of stopping an epidemic.

A pandemic was foreseen, if not expected, by certain institutions and figures:

- Bill and Melinda Gates Foundation
- John Hopkins Centre for Health Security
- World Economic Forum
- The World Health Organization (WHO)
- World Bank
- Prominent politicians
- Rockefeller document 2010⁹

And experts such as Prof. Luc Montagnier pronounce that the coronavirus results from the assisted combination of two natural viruses and could only have been achieved through meticulous work in a laboratory.

In order to achieve global government, the “elites” needed to persuade populations that events need to be regulated on a global scale. Hence the “global warming/climate change” narrative initiated and propagated by the Club of Rome/Club of Budapest/Club of Madrid/Worldshift and the UN,^{10,11} which persuades people that there are too many people on earth and the situation is unsustainable. The eugenics/depopulation agenda has been in progress since the end of the nineteenth century and is currently promoted through environmentalism¹² and Agenda 21/2030.^{13,14} A pandemic is the phenomenon that best meets this type of need.

Thus, the state is held by private interests that ban successful treatments, pending the arrival of the compulsory vaccine.

Either citizens will give in to fear, or they will reflect and understand that fear is itself maintained and controlled by their leaders, who are making all the decisions that enable the coronavirus to spread not only undeterred, but easily. They are doing it by

⁹ Rockefeller Foundation. Scenarios for the Future of Technology.

www.stopthecrime.net/wp/wp-content/uploads/2020/03/Scenarios-for-the-Future-of-Technologya.pdf.

¹⁰ “Geo-Economics and Geo-Politics Drive Successive Eras of Predatory Globalization and Social Engineering: Historical emergence of climate change, gender equity, and anti-racism as State doctrines”, by Denis G. Rancourt, Ontario Civil Liberties Association, OCLA Report 2019-1, April 2019, http://ocla.ca/OCLA_Report_2019-1/.

¹¹ The Great Global Warming Swindle - Full Documentary. www.youtube.com/watch?v=oYhCQv5tNsQ.

¹² Hidden Agendas. Planetary Association for Clean Energy, submission to United Nations Human Rights Council, 2019.

¹³ Agenda 21: The Plan to Depopulate the World by 2030 . Lukas Magnuson. 2017.

¹⁴ Forbidden Knowledge. UN Agenda 21 and Modern Monetary Theory.

<http://forbiddenknowledgetv.net/un-agenda-21-and-modern-monetary-theory/>.

denying their populations access to treatments and drugs that are useful in containing the contamination process while they put people in lockdown long enough to be able to impose on them – this is the implementation of "voluntary serfdom" – a future miracle vaccine.

This vaccine, in addition to its profitability, will undoubtedly be enhanced with aluminium salts (which has become the mandatory adjuvant), RNA messengers (which will genetically modify humans for all future generations),^{15,16} and especially RFID chips,¹⁷ which will allow everyone to receive their salaries and have access to their bank account. This stage of compulsory vaccination will be absolutely decisive in ensuring that globalists (bankers, Big Pharma and others) have direct control over populations. Each person will thus have to obey on pain of being deprived of access to all his or her means of subsistence.

As a result of the economic collapse, there is a great danger of the means of subsistence being ultimately not connected in any way with productive individual work but rather with a universal subsidy received from the puppet state entirely at the orders of the financial powers. Spain has already announced that it is introducing a universal basic income and wants it to be permanent. It is a form of insurance for the elite against social uprisings, especially if millions of jobs never come back. China has had a social crediting system since 2014 and has already blacklisted 13 million people.¹⁸ Before the end of 2020, every Chinese citizen will be assigned his/her own credit score – a de facto "dynamic profile", developed with extensive use of Artificial Intelligence and the Internet of Things (IoT), including ubiquitous facial recognition technology. This implies, of course, 24/7 surveillance, complete with Blade Runner-style roving robotic birds.¹⁹

We are collectively on a tightrope and things can go either way, depending on the ability of citizens to react, either in the direction of full globalism with world government or in that of a political takeover of countries by their nationals.

Only a political takeover of the organization of states by their nationals can lead to a favourable outcome for the populations. Otherwise, we will see the general shift desired by the supranational oligarchy towards a world government in the hands of the financial powers, with populations being destined to be sharply reduced and then the survivors enslaved.

This is why some decision-making members of this empire violently oppose this project, which will result in the disappearance of their dominant situations. The American leaders who are opposed can be called patriots. These patriots have as their worst internal enemies the stateless globalists, the head of whom resides in the city of

¹⁵ Peter Koenig. Agenda ID2020: The Diabolical Agenda within the Agenda. "Genetically Modified Humanity". www.globalresearch.ca/agenda-id2020-continued-diabolical-agenda-within-agenda/5721717.

¹⁶ Dr. Andrew Kaufman: They Want To Genetically Modify Us With The COVID-19 Vaccine. www.youtube.com/watch?v=qy5FD0Xamel&feature=youtu.be.

¹⁷ Microsoft Patent 060606: Body interfaced digital currency (patented on 26 March 2020: www.disclose.tv/microsoft-patent-060606-body-interfaced-digital-currency-397345?fbclid=IwAR3ysA9pAJTMsd3cVabaJ56GTYuxJrGI9jIOzPqSH4O9WTMIMbN8cBeR10Y.

¹⁸ Breitbart. China: Social Credit System Has 'Restored Morality' by Blacklisting over 13 Million People. <https://www.breitbart.com/asia/2019/05/14/china-social-credit-system-has-restored-morality-by-blacklisting-over-13-million-people/>.

¹⁹ Pepe Escobar: Who profits from the pandemic? - Pepe Escobar looks at a frightening future that might follow the already terrifying Covid-19 global outbreak. <https://consortiumnews.com/2020/04/08/pepe-escobar-who-profits-from-the-pandemic/>.

London, and who work underhandedly for the advent of a world government under cover of socialism.²⁰

This distinction between patriotic leaders and stateless leaders also exists in China and Russia, where the civilian government seems to be led by supporters of stateless globalists, while the army seems to be in the hands of patriotic leaders, Putin making the junction between the two opposing factions. In recent years, China has been cleansing its system to purge the state apparatus of the elite compradores,²¹ who may be linked to stateless leaders with headquarters in the City of London. This opposition between patriotic leaders and compradore leaders also exists in countries such as Iran.

Victory would be crushing for the patriots, provided that they ally with their population and do not seek to dominate it, as was instilled in them by their former compradore allies.

Nothing could withstand the alliance between patriotic leaders and local populations and this is why it is so feared by the globalist powers. The measures restricting freedom ordered by the various governments to combat the spread of the coronavirus run counter to this natural alliance that would enable the victory of the patriots over the globalists.

The cards are currently in the hands of the civilian populations who have, for the first time in history, the possibility of taking their destiny back into their own hands. They have the possibility of reinstating political governments instead of the current puppet governments, which are entirely controlled by the financial powers.

We are beginning to see that populations understand this, with common law initiatives emerging from Australia, Canada²², the US²³ and Britain.²⁴

²⁰ UN Secretary General initiates new global deal for fairer world order. <https://tass.com/world/1180059>. UN Chief calls for global leaders to “use pandemic recovery” to deindustrialize west, transition to green energy. <https://www.technicalpolitics.com/articles/un-chief-calls-for-global-leaders-to-use-pandemic-recovery-to-deindustrialize-west-transition-to-green-energy/>. Guterres is a member of Club of Madrid, sister organization to the depopulationist Club of Rome. <http://www.clubmadrid.org/who-we-are/members/>.

²¹ Compradore = person who acts as an agent for foreign organizations engaged in investment, trade, or economic or political exploitation.

²² Police State measures outlawed by Common Law Peoples' Assembly as people empowered to resist. https://www.youtube.com/watch?v=nVPFzcj_yfc&feature=youtu.be.

²³ Judge Anna von Reitz.

²⁴ New Chartist Movement.

FINDINGS OF THE INVESTIGATIVE REPORT²⁵
ON THE COVID-19 PANDEMIC AND ITS RELATIONSHIP TO SARS-COV-2 AND
OTHER FACTORS OF 13 May 2020
(FRENCH RESERVE ARMY OFFICERS)
Translation 27 August 2020

Conclusions

- Glaring inconsistencies and inexplicable "lacunae" invalidate the official theory
- The management of the health "crisis" seems to be a pretext for a totalitarian global takeover
- Totalitarian machinations: intention to impose a global cryptocurrency, a vaccine with nano-chips and a subcutaneous electronic chip
- There is massive corruption at the heart of WHO and the most unavowable intentions
- 5G is implicated in Covid-19, with electromagnetic radiation having possibly highly potentiated:
 - The pathogenic power of the virus, or
 - The Prevotella bacterium that caused the cytokine shock
- Similarity between the lung damage observed by all emergency doctors and damage caused by the use of an electromagnetic weapon (plus permanent headaches, fatigue, burning sensations in the lungs, thrombosis and loss of sensitivity to smell and taste, also cited as symptoms of COVID-19)
- Many antennas were installed thanks to the lockdown, without concern for the "precautionary principle", despite it being otherwise widely cited, in particular to hobble medical treatment
- "Covid-19" is a biological and electromagnetic war supported by a vast "smoke-and-mirrors" operation, which is sowing confusion among the ranks of medical and hospital personnel
- "Covid-19" could be the preparation for a much larger-scale joint operation combined with a smokescreen to conceal large-scale tests of the 5G weapon, for criminal ends that remain to be clarified
- 5G installations, both terrestrial and aerial (Elon Musk's satellites in low-Earth orbit), are clearly part of this "total war" project
- Dr. Jeremy K. Raines,²⁶ an authoritative electromagnetic field engineer, reports that signals are used by the human body to regulate its processes, and warns that external electromagnetic signals can seriously interfere in this process.
- No investigation has been carried out on the reaction of the Earth to the massive use of 5G technology despite it having been established that industrial activities (mining activities, oil and gas extraction, geothermal) can induce earthquakes
- Unusual earthquakes have taken place in France and municipalities have been declared to be in a state of emergency.

Recommendations

The Investigation Group formally advocates the creation of a permanent "CBRN Study Group" [*chemical, biological, radiation and nuclear*], aimed at studying biological agents and pathological electromagnetic radiation, for the purpose of giving populations the means to protect themselves from the possible widespread use of 5G

²⁵ Investigative report on the Covid-19 pandemic and its relationship to SARS-CoV-2 and other factors. French Reserve Army Officers. French original: [Rapport d'enquête d'un groupe d'officiers de réserve sur la pandémie de COVID-19 et ses liens avec le SARS-CoV-2 et d'autres facteurs.](#)

²⁶ NASA CR 166661 [Electromagnetic field interactions with the human body observed effects and theories – Jeremy K. Raines.](#)

technologies which, once in place and turned up to high power, would inevitably result in carnage, especially if they are combined with pathogenic injections in vaccine form and aerial spraying (chemtrails) of endocrine disruptors or viral agents.

Thus, while deaths caused by Covid-19 could have been amplified by 5G trials increasing the pathogenic potency of the virus, conversely deaths caused by a sudden power surge from 5G antennas could have been attributed to Covid-19.

After fifty days of investigation and in terms of risk study, the Investigation Group recommends that an urgent analysis by a Threat Study Group should be carried out on:

- The sociological impact of the Covid-19 pandemic on civil liberties and the economy
- The content of the mandatory vaccine under preparation, including the presence of nanotechnologies (electronic chips and population control)
- The intended abolition of physical currency and its impact on civil liberties (population chipping, which has already started in Europe)
- The impact on civil liberties and health of the widespread deployment of 5G, and the deployment and precise role of HAARP and SURA
- The precise nature of chemtrails and their objectives: heavy metals as endocrine disruptors (aluminium, barium), the spraying of ethnic viruses
- The risk of intercommunal clashes as a tool for the destruction of nations
- The risk of world war (widespread CBRN conflict).

For individuals, the Investigation Group recommends that they:

- Develop their autonomy:
 - Natural water point nearby
 - Food
 - Vegetable garden
 - Chicken coop
 - Beehives (if possible)
 - Essential oils, green clay, quercetin
- Not submit to a vaccine (French and international law prohibits treatment without the informed consent of the patient)
- Keep their distance from operational 5G installations
- Beware of aerial spraying (chemtrails)
 - They should not go out.

If we add to this the risk of intercommunal clashes being encouraged to destabilize and destroy nation states for the purpose of leading people towards unelected and totalitarian global governance, as well as the risks of CBRN conflicts, the future situation may well require considerable vigilance and solidarity, in a spirit of brotherhood and complementarity. Certain people seem to have decided to open Pandora's box.

OBSERVATIONS

There is treason in the air.

The statistics of the "pandemic" have been completely distorted, justifying measures under "health emergency laws" leading to:

- Confiscation of public freedoms
- Government decisions to shorten the suffering of older patients by injections of notoriously lethal substance to "avoid crowding intensive care beds"

If this is confirmed, it would be the most heinous crime against humanity ever

committed.

Panic was stoked among the population through:

- The epidemic
- The absence of tests except for VIPs
- The lockdown of the whole healthy population
- The organized shortage of masks and tests
- The government's ban on chloroquine treatment (available over-the-counter for 70 years without anyone worrying about the "precautionary principle" now used as an objection to confiscate this treatment) except for "severe forms" (translation: near death and when lung damage is irreversible)
- Media pressure supporting death-counts

Everything seems to have been done deliberately and at the highest level to:

- Spread a false medical paradigm
- Destabilize the emergency services
- Distorted the numbers:
 - By the way the tests are done
 - By the way the diagnoses are made
 - By the way cases are counted
- Expose law enforcement,
- Promote the spread of the epidemic (including reopening elementary schools while a danger persists since public institutions remain closed at the same time)
- Hamper by any and all means the reduction of the viral load of infected people.

Covid-19 is only the first salvo of an ongoing operation involving:

- Mass vaccination
- The "chipping" of humanity
- The installation of 5G antennas
- Aerial spraying of new viruses.

A Fumigation Operation? Electromagnetic Weapons For A Silent War

Dr. Andrew (Andy) Kaufmann took photos of exosomes under a microscope and compared them with photos of what is claimed to be COVID-19. These two photos were exactly the same. He then examined the genetic composition of the exosomes and that claimed for COVID-19, and it turned out that these two compositions are identical in all respects. Each attaches on the same cellular receptors. They are the same thing.

Thus one notes that the total number of deaths did not increase compared to the previous year during the same period, but this total figure includes the presumed deaths by COVID-19, which are the majority. This means that there is no increase in the number of people dying, but that their death is attributed to COVID-19, while they actually died from something else.

On WHO

- It has "a murky background"
- Was passive in this pandemic
 - Causing serious disarray among medical services by the dissemination of wrong protocols
- Is notoriously corrupt
- Has intentions that seem to be much more closely related to:
 - Totalitarian ideology
 - Eugenics
 - Criminality

- Is not concerned about the well-being of populations.

WHO and Ghebreyesus

Some do not hesitate to characterize WHO as "the most corrupt organization in the world" whose director, the Eritrean Adhanom Ghebreyesus, seems closely linked to Bill Gates, himself very concerned to "get seven billion human beings vaccinated" with this chip that he designed not with health as the goal, but population control for extremely dubious political purposes - it is difficult to fail to mention this without betraying our humanity.

Indeed, Bill Gates is notorious for having paid huge sums of money to WHO, which many claim helped appoint in 2017 – with the support of China – someone with a genocidal past in his own country, who was a member of the political bureau of the Tigray People's Liberation Front (TPFL), an organization listed on the Department of US Homeland Security's list of terrorist organizations.

In 2017, an Amhara ethnic rights organization, the Amhara Professional Union (APU), accused Tedros Adhanom Ghebreyesus of carrying out a full-fledged genocidal policy through forced vaccination, chemical sterilization and abortion, when holding the post of Ethiopian Minister of Health between 2005 and 2012.

The population of this ethnic group fell by 2.5 million between the 1997 and 2007 censuses. At the same time, the other major Eritrean ethnic groups reportedly saw their population grow by 2.6 per cent annually.

The TPFL was also accused of plundering Ethiopia and using the 3.5 billion dollars in aid received by Ethiopia (amounting to 60% of the national budget) for political repression of opponents (belonging to two majority ethnic groups). This extraordinary WHO director, who seems to be devoted to the goals of Bill Gates and his Chinese friends, served as Ethiopia's Minister of Health from 2005 to 2012, while at the same time serving as director – from 2009 to 2011 – of of an AIDS, tuberculosis and malaria programme funded by the Bill & Melinda Gates Foundation.

Good reason perhaps to question the surprising position of WHO regarding its oft-repeated recommendation not to use anti-inflammatory drugs against Covid-19 and the oft-repeated statement of this world body that "there is no treatment to date" but that a vaccine is being studied.

The WHO Director, who as minister of health was caught red-handed covering up three cholera outbreaks, will do what he is told. This is the driving force behind this policy. WHO was, notably, established by the Rockefellers. WHO tells you the procedure to follow and you follow it. You follow the protocol.

In the light of the history of the vaccine's promoters, God save us from it!

On Dr. Fauci

This troubled character is also a member of the board of directors of the Global Alliance for Vaccination (GAVI), an organization that works for the benefit of the pharmaceutical industry to impose multi-vaccination with RFID chips on the whole earth.

On old people

The French government issued a [government directive](#) on 19 March 2020 to stop accepting "frail" people over the age of 75 in hospitals, which condemns our elderly to death in EHPADs [*residential care homes for the elderly*], while at the same time this same government forbids the application of Professor Raoult's protocol in the care homes and authorizes by decree the administration of a very strong drug to sedate the

elderly (exactly the drug contraindicated for lung diseases). Treating them is forbidden, but **a treatment that will give rise to death is authorized.**

Which means that we will let them die and no resuscitation will be attempted. And when they die, without having been resuscitated, they will be part of the losses due to COVID-19. *"We are undoubtedly going to have to make choices, to decide who we are going to treat as a priority, and as far as the elderly are concerned, we are going to have to make more difficult choices"* – we are going to kill or allow these elderly people to die, who are asked to sign non-resuscitation forms, or who are targeted by government directives not to accept them in hospitals, not to apply treatment that can cure them, but **for whom an injection deemed to be lethal is authorized.**

This means that, to alleviate the suffering of vulnerable people "likely to be affected" by Covid-19 (therefore in respiratory distress, thanks to SARS), **they will be injected on instructions from the executive with products having the effect of death by suffocation.** We emphasize that **euthanasia is not allowed in France**, but that murder (intentional homicide with premeditation) is punishable by life imprisonment, and that the accomplice is punishable by the same penalties as the main perpetrator. Complicity consists of acts of provocation, instructions given, and provision of means, help and assistance. Reference to a decree will not protect the perpetrators and accomplices from criminal proceedings. **Both criminally and morally, these are none other than murders.**

"It is at best dangerous, and then constitutive of the crime of endangering the life of others or of manslaughter (with the aggravating circumstance of premeditation), at worst criminal – which is obviously the case in such a context" (Dr. Nicole Delépine, Dr. Joseph Hardy).

Certain decision-makers seem disposed to abuse these elderly people in the vilest way, elderly people who are told that the lockdown is there to protect them.

On 5G

5G is a much larger power of electromagnetic energy than what we have seen before. It is not just an update of 3G or 4G, which are already harmful enough, but a whole new part of the electromagnetic spectrum, millimetre waves, more powerful than anything we have seen before.

The human body is an electromagnetic field.

The brain communicates with the rest of the body, and the cells process thoughts, information, electrically. When this electromagnetic field is in equilibrium, we are healthy. When in imbalance or disharmony, we feel malaise, we suffer from diseases, which are manifested in the form of what we call physical or psychological diseases.

We are now bombarded 24 hours a day and 7 days a week by electromagnetic fields generated by technology and WiFi. And in this period of restriction justified by this "virus", we see 5G being installed in more and more places.

Each rise in the level of radiation results in an [epidemic](#).

Doctors and scientists from 41 countries signed a petition calling for a ban on 5G. The impact of 5G on health has not been studied, otherwise it would never have seen the light of day. **5G satellites are irradiating every square centimetre of the Earth.**

Certain people want this to happen because they seek to manipulate humanity. 5G poisons the cells; they are poisoned by the electromagnetic field. The cells release the exosomes, and they will test you positive for COVID-19.

What was the first Chinese city to install 5G, just before the appearance of this "virus"? Wuhan. The city that had the most 5G mobile phone antennas in the world is the one in which a Covid-19 bloodbath took place.

During this lockdown, 5G antennas are being deployed at breakneck speed.

Everywhere around the world, 5G antennas are being installed in large numbers.

And while all these antennas are being installed, of course people cannot demonstrate, since they are under house arrest.

Week after week, Elon Musk (a very sick person – he is perfectly aware of the reason why 5G is being set up) is sending more and more satellites into low-Earth orbit, which will irradiate the Earth with 5G. His target is to send up 42,000. Astronomers can no longer observe the night sky. He received permission to install one and a half million terrestrial antennas *[groundstations?]* in America, which will connect to satellites through the electromagnetic field. He is creating an augmented reality thanks to 5G technology, which he calls the smart network.

These people are creating an umbilical cord thanks to which the human mind will be connected via artificial intelligence. And you are even given the year in which it will start in earnest: 2030.

What if exosomes (alias "COVID-19") were not the cause of Covid-19, but in fact the consequence of the use of an electromagnetic weapon?

On the proposed vaccine

Some people – and this includes a UNESCO publication of 256 pages freely available on UNESDOC, *which we strongly recommend reading* – raise the disturbing feature of some vaccines containing nano chips and liquid crystals that can influence human behaviour, without concern for political ethics:

UNESCO: Nanotechnologies, ethics and politics

Listening to the actual statements of the "decision-makers" and their "advisers", the objective of the current operation may indeed be to inoculate populations with a very special vaccine.

Thus, the fear created by the "pandemic" would aim to "force" populations into a "vaccine" that UNESCO has provided warnings about and which is known to actually include nano chips, means of biometric identification, and liquid crystals.

Mass vaccination is part of a first step towards this agenda, which has been enacted and is called ID2020.

This ID2020 Alliance was formalized in May 2016, at the United Nations headquarters in New York, and brings together for the ID2020 agenda a private and public collective of governments, non-profit organizations, universities, more than 150 private sector companies and 11 United Nations agencies, which have collaborated to develop and **provide a unique digital identity for all humans**, by 2030, with "political unity", "global connectivity", an "emerging technology" and a "new model of identity" **closely interlocking this digital identity with access to commerce** and secure access systems.

Translation: those who refuse to be implanted will no longer be able to sell or buy anything and will be completely marginalized.

Thus, this biometric "marking" will be such as to establish total control of populations, an acknowledged goal of the "New World Order" touted in recent years by many political figures (*see sources*).

This is clearly an electronic enslavement of humanity. It is clear that the "pandemic" will be used initially to implant "coronavirus tests to permit people to work" or to "guarantee vaccination, with chips being implanted during vaccination".

Bill Gates' pronouncements clearly indicate this intention (*see sources*).

The "bio-chip" subcutaneous electronic chip has very worrying aspects:

- Ability to influence the behaviour of the chip-bearer (manipulate and control crowds)
- Ability to eliminate categories of people (reduce the world population)
- Ability to permanently locate the bearer (exit civil liberties).

These technologies exist and have been patented.

Civil disobedience may well now be the only avenue to salvation.

INVESTIGATIVE REPORT ON THE COVID-19 PANDEMIC AND ITS RELATIONSHIP TO SARS-COV-2 AND OTHER FACTORS

FRENCH RESERVE ARMY OFFICERS

13 May 2020

**ENGLISH TRANSLATION AND SUPPLEMENTARY INFORMATION
BY CLAIRE EDWARDS, BA HONS, MA**

27 August 2020

On the Translation

This text is a faithful translation of the original. The translator's explanatory notes appear between square brackets and in italics. The sole additions are supplemental and replacement references, in the course of the text and in annex, to English rather than French material for English-speaking readers.

Medical Disclaimer

This content is for informational and educational purposes only. It is not intended to provide medical advice or to take the place of such advice or treatment from a personal physician. All readers of this content are advised to consult their doctors or qualified health professionals regarding specific health questions. Neither the original authors nor the translator of this content take responsibility for possible health consequences of any person or persons reading or following the information in this educational content. All readers of this content, especially those taking prescription or over-the-counter medications, should consult their physicians before beginning any nutrition, supplement or lifestyle programme.

THIS REPORT HAS BEEN PROHIBITED FROM DISCLOSURE



The Association des Officiers De Réserve d'Aix en Provence (AORA) (Association of Army Reserve Officers of Aix en Provence) spent 50 days investigating issues related to the 2020 "pandemic". The report has been prohibited from disclosure for the time being. However, in view of the urgency and seriousness of the situation, we have chosen nevertheless to communicate it to civil society. You have in your hands the "for the general public" version, with the Investigation Group's names and the Unit's symbols redacted.

**INVESTIGATIVE REPORT
ON THE COVID-19 PANDEMIC AND ITS RELATIONSHIP
TO SARS-COV-2 AND OTHER FACTORS**

**ASSOCIATION DES OFFICIERS DE RÉSERVE D'AIX EN PROVENCE (AORA)
(FRENCH RESERVE ARMY OFFICERS)**

May 13, 2020

In accordance with your instructions and in forwarding to you this report, the Investigation Group has the honour to convey to you its findings on the characteristics of the COVID-19 epidemic, as we were able to observe them.

In order to propose a prevention protocol and to provide information on therapeutic approaches, it is necessary to establish the parameters of the pathogenic agent, which has revealed serious inconsistencies in the official version.

These inconsistencies have led to the identification of obvious corruption and an agenda contrary to public welfare, culminating in criminal and genocidal intent, and the implementation of a totalitarian state, which are reported in our conclusions.

Head of the Investigation Group,

[Name and signature withheld]

WITHOUT PREJUDICE

Original document: [Rapport d'enquête d'un groupe d'officiers de réserve sur la pandémie de COVID-19 et ses liens avec le SARS-CoV-2 et d'autres facteurs](#)

SUMMARY REPORT

COVID-19

CORONAVIRUS SARS-COV-2

Coronavirus disease 2019



COVID

Certificate of Vaccination Identity

19

1=A 9=I

AI = Artificial Intelligence

INTERNAL USE - RESTRICTED CIRCULATION

WARNING

The Investigation Group cautions against the misinformation that appears to be surrounding this issue, on which there are many diverging opinions - particularly between the "authorities" and frontline practitioners.

However, elements that appeared to form a consensus were identified and synthesized in order to build up a library of knowledge to help the reader strengthen his or her immune system and lifestyle, in the face of a virus that is anything but ordinary. One obvious fact: this virus, if it exists, is neither natural nor accidental.

Legal notice: All information contained in this document is given for informational and cultural purposes only. This information is not intended to substitute for a medical opinion: please consult your doctor. "Only doctors can prescribe drugs and only researchers operating within an institutional framework are entitled to publish valid scientific research. However, that does not prevent unvalidated protocols from saving lives in this case."

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We would like to thank the Investigation Group, whose members are French army reserve officers who spent 50 days tirelessly investigating the "Covid-19 pandemic" and delivered their findings – all verified and sourced. The analysis provided is sometimes far removed from the official line.

The investigators had to make a difficult and courageous choice between the subservience of a conventional and risk-free position, limited to official discourse, and the loyalty owed to severely affected civilian populations who are often misinformed by institutions that have shown themselves to be subservient to the Commercial Order.

Once again, the Reservists will stand shoulder to shoulder with the Nation.

1. CHARACTERISTICS OF THE SARS-COV-2 CORONAVIRUS (Coronavirus 2019-nCoV)

- The virus is not a living organism but a protein molecule (RNA) covered with a protective layer of lipids (fats) which, when absorbed by cells of the eye, nasal or oral mucosa, modifies their genetic code (mutation) and converts them into multiplier and aggressor cells.
- Because the virus is not a living organism, it is not killed but decomposes by itself. The time of decay depends on temperature, humidity and the type of material in which it is located.
- Some viruses do not have a peplum (envelope). Polioviruses, for example, do not have them.
- These are "naked" viruses. The Coronavirus has a peplum.
- What difference does it make whether or not there is a peplum?
- The fact that the virus has a peplum makes it very fragile. It is a membrane as fragile as any biological membrane. For any given virus to be infectious, it must be whole. There are two sites where viruses with envelopes will quickly degrade their envelope and at the same time lose their infectivity: the external environment and the digestive tract. In these locations, naked viruses will survive much longer.
- Coronaviruses are transmitted by digestive and respiratory routes.
- In the external environment, viruses with peplos will not survive long as they will be inactivated by two factors:
 - Temperature, even ordinary temperatures
 - Desiccation.

2. STRENGTHS AND WEAKNESSES OF THE SARS-COV-2 CORONAVIRUS

- The coronavirus is transmitted through ingestion, respiration and mucous membranes. The virus cannot pass through healthy skin.
- Sneezing projects it up to 4m, it can remain between 45 minutes and 3 hours suspended in the air in microparticles.
- Its incubation period is from 2 to 14 days.
- This virus is very elaborate; it can deceive the immune system and even turn it against the patient, or even infest bacteria to make them highly pathogenic, as we will see below.
- Its pathogenetic charge can be increased by electromagnetic radiation, as we will demonstrate (5G).
- This virus is very fragile: the only thing that protects it is a thin outer layer of fat.
- In the exterior environment, it is sensitive to temperature and desiccation.
- It does not like heat, UV (sun) or dry environments (or those that absorb humidity).
- It disintegrates under conditions depending on the nature of the surface, temperature and humidity (data vary from study to study)

VIRUS SURVIVAL TIME	
ON THE SKIN	A FEW MINUTES (¼ HOUR)
IN AIR	3 HOURS
COPPER (<i>naturally antiseptic</i>)	4 HOURS
CLOTHING, HAIR, POROUS SURFACES	12 HOURS
WOOD (<i>removes all moisture and acts by dessiccation</i>) (<i>unpainted wood</i>)	4 HOURS (up to 4 days)
CARDBOARD	24 HOURS (up to 5 days)
GLASS, METAL, STEEL (<i>polished surfaces</i>)	3 DAYS (up to 5 days)
PLASTIC	3 DAYS (up to 9 days)

The incubation time of the virus is assumed to be between 1 and 14 days (most often 5 days.)

NB. Gloves and mask recommended for shopping due to the risk of contamination in a busy and enclosed environment.

3. SYMPTOMS

In the absence of generalized tests, known symptoms of Coronavirus infection SARS-CoV-2 are as follows, but are not all developed in all people infected (55-70% of people are asymptomatic):

- Persistent headaches
- Fever above 38.1° (in 90% of cases)
- Chills, tremors
- Nausea
- Confusion
- Common cold
- Loss of taste (ageusia)
- Loss of smell (anosmia)
- Symptoms of severe fatigue, weakness
- Aches and muscle pains
- Shortness of breath
- Skin lesions (20% of cases): erythema, urticaria
- Possible conjunctivitis
- Digestive symptoms (odd stools), nausea
- Dry cough, sore throat
- Intolerable headaches
- Sensation of tingling and then intense burning in the lungs
- Cardiac arrhythmia
- Cytokine shock – overreaction of the immune system, which attacks healthy cells
- Generalized venous thromboembolism (especially pulmonary)
- Severe acute respiratory distress
- Multiple organ failure, brain damage.

These symptoms were grouped into three stages. What is most striking is the huge range of symptoms, which vary from case to case and mostly exist in other diseases.

THE THREE STAGES OF SYMPTOMS

PRE-INFECTION SYMPTOMS COVID-19 STAGE 1

- Itchy throat, thick white mucus.
- Dry cough (produces a sharp, metallic sound).
- Heating of the forehead, thorax, shoulders, chest, heating of the head without fever.
- Cramps in the body, legs.
- Feeling of heat without fever.
- Generalised tiredness.
- Sudden headache that can be strong, like a needle.
- Loss of appetite.
- Stinging around one or both eyes.
- Minor cognitive disorders: sudden dizziness, momentary inconsistent/delusional behaviour or speech.
- Persistent feeling of thirst, taste changed in the mouth.
- Slight temperature rise, typically 37.5°C, or temperature drop, typically 36.5°C to 36.8°C, during the very first days.
- Skin lesions on fingers of hands or feet (appearance of pseudo-frostbite of the extremities). Sudden appearance of persistent and sometimes painful rashes, and transient urticaria lesions.

COVID-19 INFECTION SYMPTOMS STAGE 2

- High fever, typically 39°C to 39.5°C, requiring bed rest for 3 to 5 days.
 - Nagging aches throughout the body.
 - Cognitive disorders: dizziness, loss of consciousness or convulsions, inconsistent/delusional speech. Loss of taste, smell or vision.
 - Severe headache.
 - Intense burning sensations in the breast, chest, shoulders, hands.
 - Severe generalised tiredness like flu, dehydration.
 - Dizziness, ramblings, delirium and/or loss of consciousness.
- or
- Strong burning in the throat and thick green mucus.
 - Diarrhoea combined with a sharp chemical odour, linked with vomiting.
 - Moderate fever, typically 38°C to 38.5°C; not flu symptoms.
 - Very intense headaches, eyes that "burn".
 - Spikes of pain in the body without aches, very long chills (lasting for more than an hour).
 - Cognitive disorders: dizziness, impaired consciousness or convulsions, inconsistent/delusional speech. Loss of taste, smell or vision. Insomnia.
 - Intense burning sensations in the breast, chest, shoulders, hands.

COVID 19 INFECTION SYMPTOMS STAGE 3 CALL EMERGENCY SERVICES

- Difficulty breathing
- Feeling of suffocation
- High fever: above 39°C
- Intense burning sensations in the breast, chest.

NB. A single symptom is not sufficient to assume infection, except for stage 3 symptoms.

4. DIAGNOSTIC TESTS

Currently, RT-PCR tests are deemed to detect the presence of coronavirus (*[reverse transcription]* polymerase chain reaction).

The RT-PCR test is based on the detection of the virus genome from a nasopharyngeal sample. It enables the confirmation of whether the person, at the time of the test, is infected with the virus. The serological test looks for antibodies of IgM and IgG classes specific to SARS-CoV-2 by means of a blood sample. It enables the definition of the immune status of a person, in clear terms of whether they are immune to the virus, even if they have no symptoms.

The RT-PCR test is a non-invasive test that takes only a few seconds and can be more or less painful depending on the sensitivity of the individual, says Dr. François Blanchecotte, president of the Union of Biologists. "This is to detect a strand of RNA belonging to the SARS-CoV-2 coronavirus behind COVID-19." In order to confirm the presence or absence of the virus, deep nasal cells are taken using a swab, a kind of long cotton swab that is inserted into the nasal cavities, up to about 15 cm. Only two types of healthcare professionals are authorized to take this sample: nurses (and doctors) and biologists - whether they be pharmacists or doctors.

In addition, in order to avoid false negatives, health professionals emphasize that it is necessary to explore both nostrils when sampling. Finally, in the case of a severe patient, a sampling in the trachea or bronchi may be more relevant, since the virus gradually migrates to the respiratory tract. After a few days, the viral load in the nose of a patient with COVID-19 could be zero.

These tests were not generally available in France during the health crisis. Their effectiveness and even their validity are hotly disputed.

In fact, "the RT-PCR (*reverse transcription Polymerase Chain Reaction*) test, although used for this purpose, is not intended to detect the presence of the virus genome of COVID-19 disease, but only 'genetic material' that may have different origins. Despite this, the people tested are diagnosed as being infected with COVID-19 and their subsequent death is then attributed to COVID-19. Furthermore, the amplification cycle used (the sensitivity of the test) in different countries dictates the number of positive tests obtained."

Also, some serological tests (2 detection tests and 4 types of tests developed for the detection of SARS-COV-2 antibodies) have 40% false negatives.

A climate of distrust reigns in France following the results of several studies indicating "that there are a lot of false negatives circulating in France". Dr. Chaix, interviewed by Medisite last March, confirmed this by referring to a false negative rate of between 20 and 30%, although he could not state this with certainty. But now a new scandal has confirmed the doubt. India has decided to suspend the use of rapid tests for Covid-19 following questionable results. 650,000 of these tests, sourced from China, were found in initial trials to be defective. In total, Chinese rapid tests have margins of error ranging from 6% to 71% when their results are compared to more reliable tests carried out in the laboratory (which still have 40% of "false negatives", therefore errors). Since these tests are unreliable, the statistics are obviously skewed.

5. IMPACT OF WEATHER AND CLIMATE

Among the different types of coronavirus, the one that affects us at the moment comes from the P4 (high security) laboratory, a sino-French medical cooperation in Wuhan. It originates from research and has undergone RNA modifications from the HIV virus.

Wuhan climatological table (1981-2010)

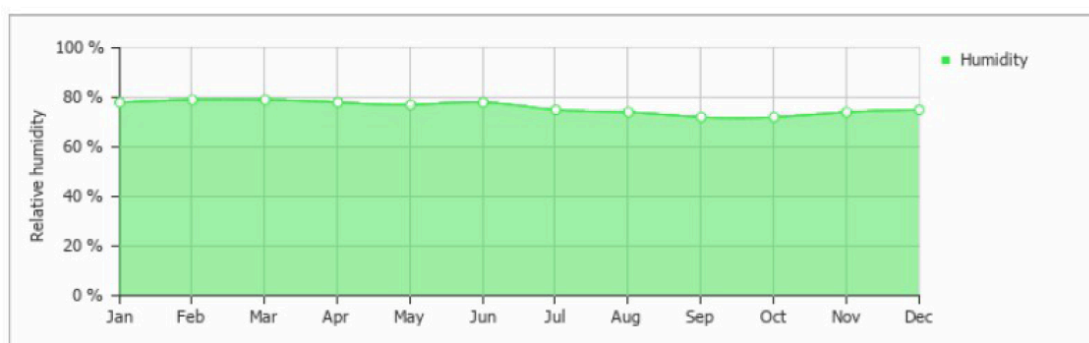
Mois	jan.	fév.	mars	avril	mai	juin	jui.	août	sep.	oct.	nov.	déc.	année
Température minimale moyenne (°C)	1	3,5	7,4	13,6	18,9	22,9	26	25,3	20,7	14,7	8,4	2,9	13,8
Température moyenne (°C)	4,6	7,1	11,3	17,9	23	26,6	29,5	28,9	24,6	18,9	12,6	6,9	17,7
Température maximale moyenne (°C)	8,1	10,7	15,2	22,1	27,1	30,2	32,9	32,5	28,5	23	16,8	10,8	21,5
Record de froid (°C)	-18,1	-14,8	-5	-0,3	7,2	13	17,3	16,4	10,1	1,3	-7,1	-10,1	-18,1
Record de chaleur (°C)	25,4	29,1	32,4	35,1	36,1	37,8	39,3	39,6	37,6	34,4	30,4	23,3	39,6
Ensoleillement (h)	101,9	97	121,8	152,8	181	170,9	220,2	226,4	175,8	151,9	139,3	126,5	1 865,5
Précipitations (mm)	49	67,6	89,5	136,4	166,9	219,9	224,7	117,4	74,3	81,3	59,1	29,7	1 315,8
Nombre de jours avec précipitations	9,5	9,8	13,1	12,5	12,2	11,8	11,6	9,6	7,5	9	8	6,9	121,5
Humidité relative (%)	76	75	76	75	74	77	77	77	75	76	75	73	75,5

Source : [Agence météorologique chinoise 17](#)

Source: Chinese Meteorological Agency 17.

Months	Temperature			Precipitation Normal
	Normal	Warmest	Coldest	
January	26.0°C	28.9°C	23.0°C	9
February	26.1°C	29.0°C	23.2°C	9
March	25.6°C	28.5°C	22.8°C	12
April	24.1°C	26.9°C	21.4°C	9
May	22.5°C	25.2°C	19.8°C	10
June	21.1°C	23.7°C	18.5°C	10
July	19.9°C	22.6°C	17.2°C	9
August	20.0°C	22.8°C	17.2°C	7
September	20.8°C	23.8°C	17.7°C	5
October	22.4°C	25.5°C	19.2°C	5
November	23.9°C	27.0°C	20.7°C	6
December	25.0°C	28.2°C	21.9°C	6

Monthly total of sun hours



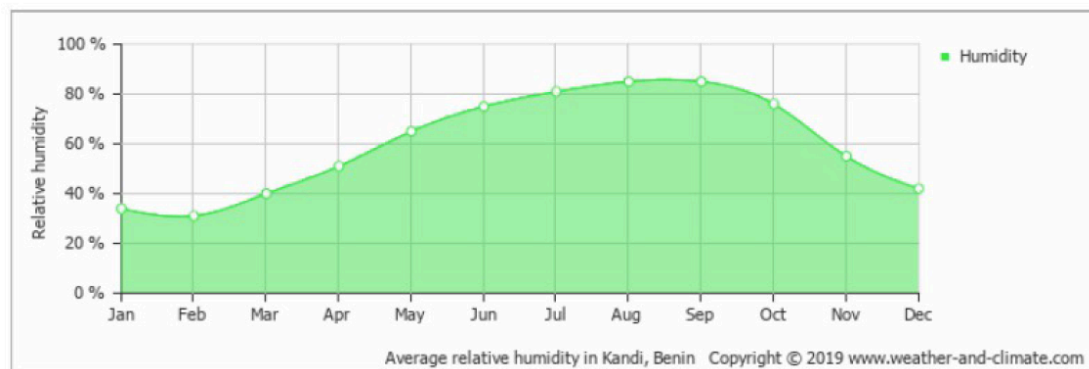
Kandi, Benin

Temperature °C

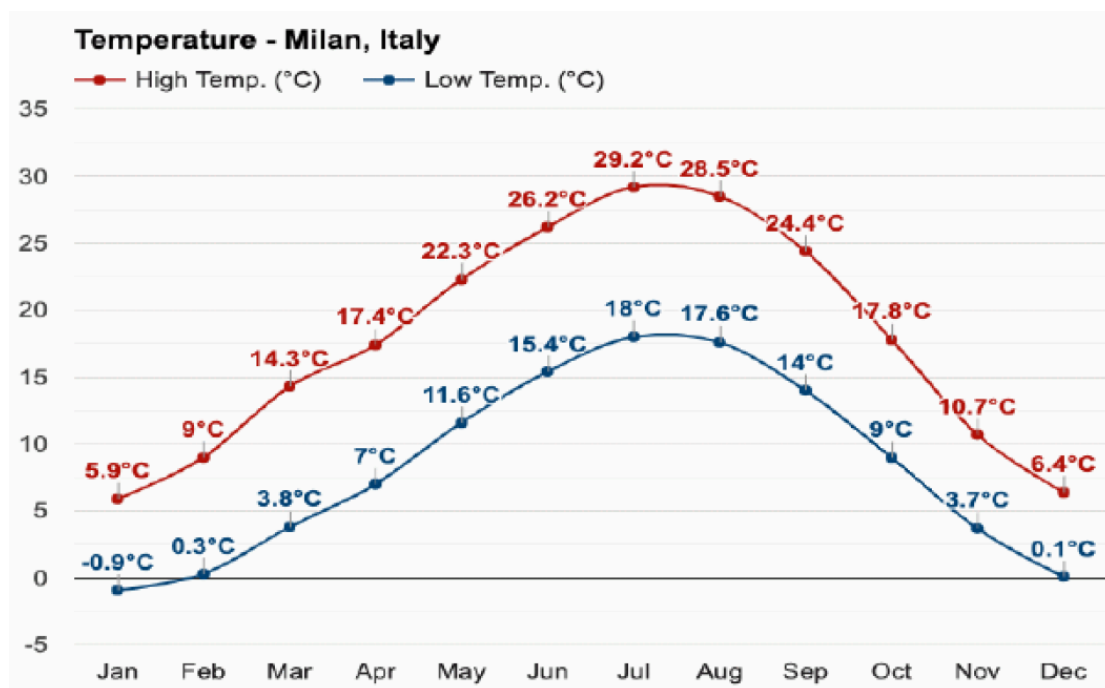
Precipitation

	• Max. Ø • Min. Ø		• mm • Days		relative Humidity	Sunshine h/Day	Water °C
Jan	34,1	16,1	0	0	33	9	-
Feb	36,3	18,6	3	0	28	9,2	-
Mar	38,4	23,2	8	1	36	8,4	-
Apr	38,1	25,3	41	3	52	8,5	-
May	35,2	24,2	107	8	65	8,8	-
Jun	32,2	22,5	153	10	75	8,4	-
Jul	30	21,6	194	12	82	7,2	-
Aug	29,3	21,5	272	16	85	6,3	-
Sep	30,4	21,2	191	12	85	7,1	-
Okt	33,3	21,2	34	4	76	8,9	-
Nov	35,4	18,4	1	0	54	9,4	-
Dec	33,9	15,8	0	0	40	9	-
Year	33,8	20,8	1005	66	59	8,4	-

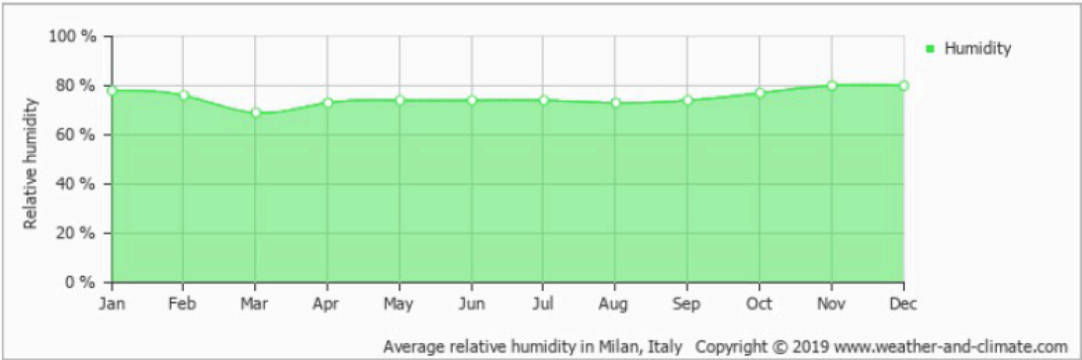
Average monthly hours of sunshine and humidity in Kandi



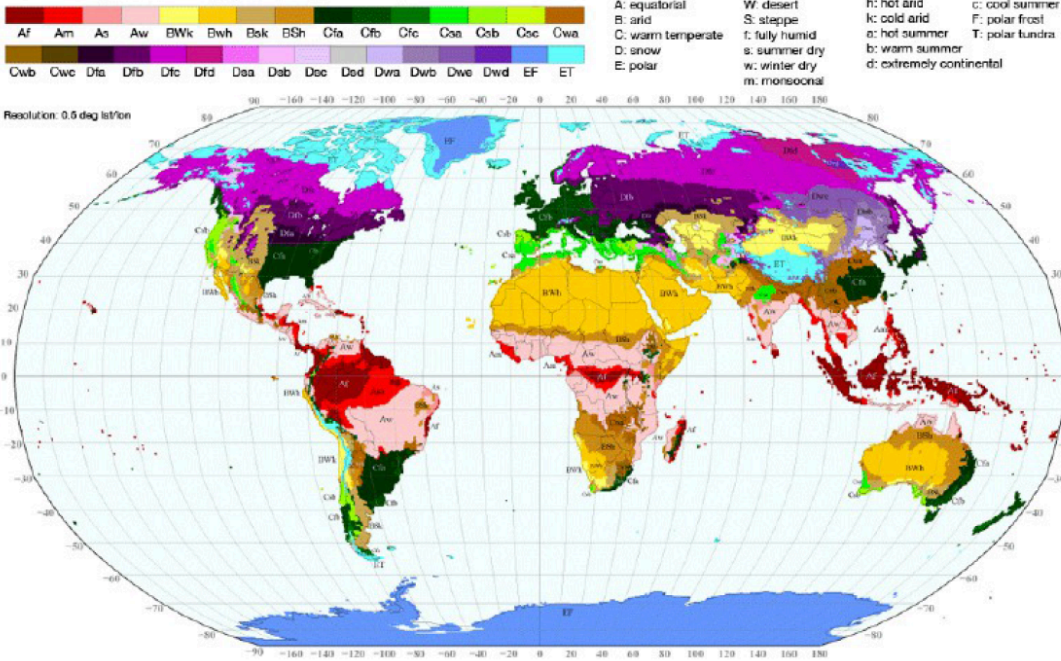
Milan, Italy



Average monthly hours of sunshine and humidity in Milan



World Map of the Köppen-Geiger Climate Classification



Place	Pop. density (N° inhabitants/km ²)	Cases	Fatalities	Climate		
				Av. max. temp.	Relative humidity	Sun hours/month
Wuhan, China* (outside suburban areas[?])	5,825	50,000	2,531	22.1	75	152.8
Nouméa, New Caledonia	2,135	18	0	26.9	79	200
Kandi, Benin	52	54	1	25.3	50	255
Milan, Italy	7,520	183,957	24,648	14.7	72	175
* Given the number of funeral urns (at least 40,000), the pace of operation of the 7 crematoriums and their queues, no one in Wuhan believes the figures announced by the government.						

Source: Courrier international: <https://www.courrierinternational.com/revue-de-presse/chiffres-wuhan-personne-ne-croit-au-bilan-officiel-des-deces-du-covid-19>

6. PREVENTION: DISINFECTION OF SKIN AND SURFACES

Due to the properties of this virus, any soap or detergent is the best remedy: preferably a MARSEILLE soap,[*] because the foam BREAKS DOWN THE FAT. That's why it is necessary to rub your hands so much: for at least 30 seconds and make a lot of foam. Dissolving the fat layer, the protein molecule disperses and decomposes by itself. You can also use an organic detergent (or even an egg yolk, which is a surfactant).

[* Translator's note: Marseilles soap or "Savon de Marseille" is a traditional soap made from vegetable oils that has been produced around Marseilles, France, for about 600 years.]

- Heat dissolves fat; use water as hot as possible to wash your hands, clothes and everything else.
- Hot water also produces more foam, which makes it even more effective.
- Alcohol or any mixture with an alcohol content over 65% DISSOLVES ALL FAT, especially the outer lipid layer of the virus.

However, the repeated use of hydroalcoholic gel is counter-productive: it damages the skin (which is a natural barrier) and through the resulting cuts and crevices enables the virus to enter the body.

Any mixture with 1 part of bleach to 5 parts of water directly dissolves the protein, decomposing it from the inside. It is, however, preferable to wash with detergent prior to using this method.

- Peroxide water (or oxygenated water, which is hydrogen peroxide in solution) helps a lot after soap, alcohol and chlorine, as peroxide dissolves the viral protein, but you need to use it pure and it damages the skin. Here too, you creating risk crevices and cracks that will facilitate the penetration of the virus into the body. So no repeated use.

- NO BACTERICIDES. The virus is not a living organism like bacteria; you cannot kill a non-living organism with antibiotics, but only quickly disintegrate its structure through the aforementioned methods.
- NEVER shake clothing or sheets whether used or unused. Although stuck to a porous surface, the virus is inert and disintegrates in 3 to 12 hours on fabric. But if you shake it or use a cloth, the molecules of the virus will float in the air for 45 minutes to 3 hours and can settle in your nose.

Viral molecules remain very stable in outdoor or artificial cold like air conditioners in homes and cars (or in refrigerators). They also need moisture to stay stable, and especially darkness. As a result, dehumidified, dry, warm and bright environments will degrade it faster.

- UV light on any object will break the protein of the virus. For example, exposing a mask for a long period in the sun to disinfect and reuse it is perfect.
- **Beware!** Vinegar does not disinfect Coronavirus, as it does not break down the protective layer of fat.
- NO ALCOHOLIC BEVERAGE OR VODKA. The strongest vodka is 40% alcohol and you need 65% to act on the envelope of the virus.

7. PREVENTATIVE ACTIONS

- Observe strict hygiene rules for your body and clothing, whether indoors or outdoors.
- When going outside for more than 30 seconds without being able to wash hands and wrists with soap and water, use a disinfectant or surgical soap.
- Keep at a minimum distance of 4 metres from other people. Even without sneezing and coughing, microscopic droplets are diffused when people talk and breathe.
- Do not kiss or shake hands. Nor any other things that morality criticizes.
- Never sit on the toilet seat. Good luck!
- Open the toilet doors and all manually opened entrance doors with a handkerchief or glove, etc.
- Go out alone and covered! Who would have thought that in 2020, going to the bank with a mask and gloves would be considered normal?
- In each household, only one person, always the same one, should go out shopping for the household. Shopping should be done to last for one or two months. If that is not possible, then every two weeks maximum!
- Never go out accompanied by a child or an elderly person. Not because they have a greater risk of dying from the virus, since people from 7 to 77 die from it, but because these two age groups are less capable of performing perfect preventative actions.
- Dress in robust clothes that cover the whole body (if possible including hair).
- Leave your shoes on the doorstep (risk of contamination by sputum).
- Disinfect your shoes (with bleach) after each trip out. Contamination was found frequently on the shoe soles of caregivers.
- As soon as you enter the house, undress and put your laundry directly into the washing machine (temperature min. 60°: the virus survives up to several hours).
- Contaminated masks and gloves must be disinfected before being discarded or burned.
- For washing any clothing that has been worn outside, use 2 doses of SANYTOL (disinfectant stain remover), which you should add to your usual laundry.

- On the face: mask (FFP3, FFP2, a homemade fabric, or surgical) and skiing, swimming or work (e.g.: hang gliding) glasses. Given the size of the viruses, the mask itself has more of a psychological than real effect.
- Distance is the best prevention. In fact, if only one person comes within a radius of 3 metres and coughs, your face receives particles containing a viral load of SARS-CoV-2.
- In addition to the protection they afford, wearing gloves makes it more difficult to touch your face. The protection of the face with a mask or scarf also strengthens the fight against this automatic gesture.
- Be ready to move away if someone comes within 4 metres of you.
- It is better to wait to take a bag of flour than to find yourself within reach of a potentially infected person's mucus.
- Respect the quarantine! Do not allow yourself any unnecessary trips outside.
- Don't open the door to anyone.
- Avoid social gatherings or going to see a close friend or family member living less than a kilometre away.
- Keep the virus away without becoming obsessive. Stay calm.
- Consider disinfecting your car and front-door handles with surface spray, Sanytol or Twido multi-surface disinfectant (or with bleach), in addition to regular cleaning.
- Preventative actions must be maintained after quarantine, for as long as the pandemic continues.

8. HEALTH CARE

- In terms of conventional medicine practised under medical supervision, the World Health Organization [WHO] has said that "to date, no specific drug is recommended to prevent or treat infection with the new coronavirus (2019-nCoV)."
- The WHO, in its publication entitled "[Clinical management of severe acute respiratory infection \(SARI\) when COVID-19 disease is suspected](#)" of 28 January 2020, presents Covid-19 infection with associated clinical symptoms ranging from mild pneumonia to acute respiratory distress syndrome, through severe pneumonia "with" respiratory failure that cannot be "fully explained by heart failure". In the treatment, WHO advocates oxygen therapy and antimicrobial therapy, and states: "Do not routinely give systemic corticosteroids for treatment of viral pneumonia or ARDS outside of clinical trials unless they are indicated for another reason."
- The greatest caution was required and the treatment of Professor Didier Raoult (hydroxychloroquine + azithromycin) practised at the IHU [*Institut Hospitalo-Universitaire*] - La Timone [*place name*] and in hospitals, the list of which is in the public domain, was not encouraged by the authorities. Chloroquine, which had been on the open market for 70 years, was suddenly classified as among poisonous substances and general practitioners were banned from prescribing it in the case of Covid-19.
- In addition, the College of Doctors threatens to suspend doctors prescribing off-protocol. Such ongoing pressure put on doctors is repeatedly in evidence in the case of Covid-19.
- It will be recalled that the College's Governing Council was created by the Vichy regime on 7 October 1940 by a law that also abolished trade unions during the period after July 1940 when the northern part of France was under military occupation by the Nazi regime. The Vichy government is known to have implemented a policy of collaboration with the Nazi regime.
- Before discussing health care, it is therefore appropriate to closely examine this case in which some confusion and definite pressures hold sway, and to analyse

the feedback from frontline doctors, as well as how the official recommendations developed, if indeed there were any.

- We have all been alerted to the imperative not to use anti-inflammatory drugs in the case of suspected Covid-19 involvement: neither Ibuprofen, nor aspirin, nor cortisone. According to the sources relaying government directives, anti-inflammatory drugs would cause the virus to "flare up" and lead patients directly into resuscitation. The world health authorities, the Ministry of Health, the General Directorate of Health, have communicated widely on this topic.
- However, this virus – initially presented as a kind of viral pneumonia starting with something slight, a cough, chest pain [*angina*] which gradually worsened, ending with a symptom called "syndrome of acute respiratory distress" (SARS) – poses complex questions.

Dr. Kyle-Sidell, an emergency doctor in New York, says this is the paradigm that every hospital in the country is working on. It is the disease, acute respiratory distress syndrome, that every hospital is preparing to treat. And yet, this emergency doctor indicates that what he is seeing leads him to think that Covid-19 is not this syndrome and that doctors are working under a medical paradigm that is wrong. According to him, a lot of damage has been done by this confusion. These patients are actually slowly deprived of oxygen and their face turns blue, which is a sign that "the blood is no longer getting through."

Professor **Sandro Giannini** of Bologna, who is an indisputable medical leader, says that people find themselves in resuscitation when they actually present a generalized venous and mainly pulmonary thromboembolism. He points out that, if this is the case, resuscitations and intubations are useless since it is necessary to first dissolve or rather prevent these thromboembolisms. There is no point in ventilating a lung where blood is not arriving.

In fact, it seems that the problem is cardiovascular and not respiratory. It is venous microthrombosis and not pneumonia that causes death. Professor Giannini indicates that inflammation induces thrombosis by a complex but well-known pathophysiological mechanism.

Contrary to some recommendations that "no anti-inflammatory drugs should be used", today in Italy anti-inflammatory drugs and antibiotics are used, and the number of people hospitalized is falling. He points out that many of the deceased had a history of high fever without being treated properly and that thus the inflammation destroyed everything and prepared the ground for the formation of clots because the main problem is not the virus, but the immune reaction that destroys the cells where the virus enters.

In fact, it was found that no patient with rheumatoid arthritis has ever entered the Italian "Covid" services, because they take cortisone, a powerful anti-inflammatory drug. Probably also because these people take hydroxychloroquine, Plaquemil [*sic**], indicated for rheumatoid arthritis.

*[*Translator's note: Plaquenil (hydroxychloroquine) is used to treat or prevent malaria, a disease caused by parasites that enter the body through the bite of a mosquito.]*

Professor Giannini adds that as a result, in Italy, hospitalizations have decreased and the disease is becoming a disease that is treated at home. Properly treating it at home helps to avoid not only hospitalization but also thrombotic risk. He indicates that it has not been easy to understand because the signs of microembolism are blurred, even on ultrasound. He calls it disastrous not to use anti-inflammatory drugs.

It is interesting to see today that a number of therapeutic advances are coming from frontline general practitioners and that the information is overlapping.

Another frontline doctor, Dr. Sabine Paliard-Franco (general practitioner in Chabons - 38), cured 100% of her Covid patients. She prescribes a combination of Macrolides + C3G, two families of well-known antibiotics, which are very inexpensive and easy to produce and have been used for 20 years against atypical pneumonia.

- Macrolides are antibiotics capable of diffusing into tissues and inside cells.
- C3G are third-generation cephalosporins (a class of beta-lactam antibiotics).
- Dr. Paliard says that "in 24 to 48 hours, all the symptoms disappear drastically, prodigiously, in all her patients, whether presenting with mild or more severe forms". Fifteen people had severe forms of the disease with respiratory problems and at-risk areas (very old people, smokers, diabetes, cancers, etc.). She thought she would have to send them to the emergency room quickly and even thought she would never see some of them again. But none needed to go to hospital. All of them recovered in 24 to 72 hours.
- Her protocol of care was disseminated nationally by the very reliable French Society for Geriatric Medicine. Since then, several hospital departments have been applying her care protocol and many lives have been saved (including a 97-year-old patient with respiratory failure).

It should be noted that Professor Raoult not only gives hydroxychloroquine, but combines it with an antibiotic: azithromycin (an antibiotic of the macrolide family, in fact).

However, Dr. Paliard has never prescribed chloroquine so there is no risk of cardiovascular side effects in her protocol. What if the miracle treatment was not the chloroquine that we keep hearing about, but the macrolide given both by Professor Raoult, Dr. Paliard and various other practitioners with the same excellent results?

A document from the French Public Health Council was finally put online on 5 March 2020 and prescribes the same treatment : **Macrolides + C3G**.

For people with a contraindication to macrolides, it is possible to be prescribed another family of antibiotics, **tetracyclines**. An American study showed their virucidal action against Covid and Dr. Paliard successfully prescribed them to people who could not take macrolides.

So there is a treatment that works.

These findings on the ground suggest that official recommendations prohibiting the use of anti-inflammatory drugs have failed to take into account the reality of a known phenomenon: cytokine shock.

Because if the inflammatory reaction is a natural immune phenomenon of the body (anti-inflammatory drugs are not usually taken in the case of a viral infection), what severe cases of Covid-19 are really about is cytokine shock.

- Cytokine shock is a **massive inflammatory phenomenon**. Cytokine shock mainly affects adults in their prime. It seems that children, whose immune system is still immature, and the elderly, whose immunity is weakened, are spared this immune spike.
- Eventually, an acute respiratory distress syndrome appears, which can lead to multi-organ failure and death. From the very beginning of the COVID-19 pandemic, Chinese doctors suspected the role of cytokine shock in the expression of the most severe forms of the disease.

- **Cytokine storm: when the immune system overreacts:**
One of the peculiarities of Covid-19 (due to the SARS-CoV-2 coronavirus) in a notable proportion of cases is the triggering of a "cytokine storm", (we hear also of secondary haemophagocytic lymphohistiocytosis), that is, the massive release of these molecules involved in the activation and control of immunity. This is a sort of hyperinflammation that can be fatal. This article details its main mechanisms. The biology of cytokines also explains, at least in part, the fact that we are not all equal in the face of infections: for some, Covid-19 is benign, for others it takes severe forms.

"In March 2020, the results were published of a trial involving 21 patients with severe or critical forms of COVID-19 (81% of severe forms, 19% of critical forms). These patients received, in addition to the local "standard treatment" (lopinavir, methylprednisolone, oxygen therapy, symptomatic treatments), an intravenous infusion of 400 mg of Tocilizumab.

In 18 patients, administration of Tocilizumab resulted in the disappearance of fever within 24 hours. Three patients, whose fever resisted, received a second administration 12 hours later, with disappearance of hyperthermia. In the days following the treatment, oxygen requirements decreased in 75% of patients and one of them no longer needed oxygen therapy.

On the 5th day after treatment, the blood level of lymphocytes returned to normal in 53% of patients. The blood level of C-reactive protein was normalized in 84% of cases. Lung lesions had disappeared in 19 patients (91%). At the time of publication of the study, 19 patients had left the hospital, on average 13.5 days after treatment with Tocilizumab.

This preliminary study is consistent with numerous anecdotal reports from infectious diseases specialists and intensive care doctors around the world; it has led several teams to launch clinical studies, the details of which are provided in a second article also published in today's Vidal news."

NB. Tocilizumab is especially prescribed in the case of rheumatoid arthritis!

Therefore, in this context of an onslaught of cytokine storms "in significant proportion" affecting patients with Covid-19 due to SARS-CoV-2 coronavirus, it seems that the recommendation to "not take anti-inflammatory drugs" is in many cases seriously wrong.

These official recommendations now seem to be invalidated by findings on the ground. It appears that this information is the result of a medical paradigm that can be considered false in this case and which initially destabilized emergency medical services.

Everyone will of course have their opinion according to their own understanding: all data relating to what is set out above are free to access and are in the public domain.

Inflammation is obviously a natural reaction of the body, like fever. So the medical response may be not to remove it, with sometimes risk of thrombus.

However, Professor Giannini says that no patient with rheumatoid arthritis – therefore treated with cortisone, a powerful anti-inflammatory, and sometimes with hydroxychloroquine – was ever admitted to the Italian "Covid" services, which suggests that in this specific case and taking into account the very conception of the virus, the anti-inflammatory drug protects from the explosive reaction of the immune system in the face of infection with Covid-19, setting the stage for a mainly pulmonary generalized thromboembolism. This explosive reaction of the immune system could have been observed in this case in "a significant proportion" (sic).

- **This massive, potentially lethal inflammation, which particularly affects healthy adult subjects, is well known: it is called cytokine shock. It is surprising that official communications seem to ignore it and by default prohibit the use of anti-inflammatory drugs. In this regard, another frontline doctor, Dr. Gilles Besnainou, ENT, has published videos where he is visibly in shock and aware of having been misinformed. He says that doctors now know that it is a thromboembolism, which must be treated with anticoagulants.**

He refers to the treatment of Dr. Paliard without citing her, with two antibiotics (plus zinc), and says that this disease (having a bacterial component) comes "from an incredible virus" (sic) and that *"he has never seen so many parts of the body affected: the skin, the kidney, the lungs, we see that it touches all the organs, the eyes, conjunctivitis, cough, blocked nose, loss of sense of smell"* and it is not known whether it is vasculitis or neuropathy (inflammation of the vascular endings or inflammation of the nerve endings).

- At the level of the frontline (intensive care unit), it is argued that anti-inflammatory drugs are immuno-suppressants and that, of course, they slow down the reaction of respiratory distress, but on the other hand they create an outbreak of viral or even bacterial load if there is co-infection. Thus, this would put the patient largely in difficulty, to bring him or her to a septic shock, therefore a multi-organ failure (cardiovascular and respiratory system, then renal and intestines), while initially Covid-19 would stop at a failure of only one organ: the pulmonary parenchyma.

As can be seen, the analysis is far from unanimous.

- However, it can be argued that the administration of an anti-inflammatory drug in combination with an anti-viral drug (such as hydroxychloroquine, which lowers the viral load), two antibiotics (Macrolides and C3G) and, if necessary, an anti-coagulant, would give rise to objections.
- It must be obvious that all this ultimately comes down to a particularly complex strictly medical question, of choice of doctor and the choice of a doctor: thanks to this health crisis, the public health system no longer seems so monolithic.
- So the choice of one's doctor will greatly affect the treatment.
- Upon analysis, therefore, one is left with an impression of confusion and contradictions between official protocols and the recommendations of frontline doctors, or even of panic, of sometimes angry reactions, and one has a picture of quite distraught and divided frontline practitioners subjected to pressure and facing a virus that appears to be very aggressive, resourceful, structured as a weapon of war and very well designed.
- However, as we will see below, this cytokine storm is the signature of the *Prevotella* bacterium, just as are all the other parameters of this infectious disease. To effectively combat SARS-Cov-2, it is necessary to kill *Prevotella*.

Doctors from the *Orthomolecular Medicine News Service* and the International Society for Orthomolecular Medicine recommend a nutrient-based method to prevent and minimize the symptoms of a future viral infection. The following inexpensive additional levels are recommended for adults, for children they should be reduced proportional to body weight.

Vitamin C: 3,000 milligrams (or more) per day, in divided doses.

Vitamin D3: 2,000 international units per day (start with 5,000 IUs/day for two weeks, then reduce to 2,000)

Magnesium: 400 mg per day (in the form of citrate, malate, chelate or chloride)

Zinc: 20 mg per day

Selenium: 100 mcg (micrograms) per day.

It has been shown that vitamin C, vitamin D, magnesium, zinc and selenium strengthen the immune system against viruses.

OPINION OF PROFESSOR MONTAGNIER (biologist, virologist, Nobel Prize in Medicine 2008)

Professor Luc Montagnier, who explained at length about the **antennas**, [?] says: "There is a manipulation on the subject of this virus. To this model, sequences including particularly HIV, the AIDS virus, have been added. It is not natural, it's a professional job, this is work done by a molecular biologist. It is a very painstaking job, one could say a watchmaker's job. The genetic material of the virus is a long RNA ribbon. In a certain place, HIV sequences were set.

There is a desire to stifle debate. A group of Indian researchers published the same thing. They were forced to retract. (...)

The coronavirus protein was modified to make the immune system recognize it as HIV, so that (the sequences) were exposed to the immune system.

Huge pressure has been brought to bear: there is a "blackout" on everything relating to the origin of the virus. There may be pressure from all global or national bodies that have an interest in hiding the truth. These are facts – we can't deny them.

"The genome of SARS-CoV-2 contains HIV sequences. That cannot be a natural mutation. To insert an HIV sequence into this genome, you need molecular tools. This can only be done in the laboratory. That can only be a deliberate action. The story of the fish market is a beautiful fairytale, but it is not possible."

Nature does not just accept any old thing. Anything can be done to nature, but if you make an artificial construction, it is unlikely to survive, that is to say that nature loves harmonious things, and what is alien is not well tolerated.

This is what is happening: as the epidemic develops, especially in the United States where there are the largest number of cases, there is an evolution by mutations. These sequences are going to mutate.

Mutating means one nucleotide changed in relation to another, so the genetic code is modified, but it also means deletions, that is to say there are whole pieces of the genome – and what is really extraordinary is that it is precisely the region that carries

the HIV sequences that mutates much faster than the others, so itself disappears by deletion. In the western part of the United States in Seattle, this sequence is almost destroyed; it does not work any more.

So, one can imagine that if the new pathogenetic power of the Corona is linked to the introduction of these sequences, that it will disappear.

It is possible that the contagiousness of this virus is precisely related to its artificial manufacture, because the transmission is related to the association between a protein of the virus and a receptor on the cells and therefore the more the virus finds receptors on these cells, the more it will be able to stick and penetrate, so transmit the information.

Certain (electromagnetic) wave frequencies may change the presence of these sequences. Since they're foreign, we may be able to distinguish them from the rest of the Coronavirus and selectively destroy them. To stop the pandemic, one could eliminate these sequences by using interfering waves.

We live in a very different environment from that of our ancestors and there are bigger and bigger projects aiming at these electromagnetic waves surrounding us even more.

It was said that the city of Wuhan was well advanced in terms of the installation of 5G antennas.

Ten thousand antennas are in this region and therefore they may have contributed to the pathogenic power of the virus.

To sum up, this virus is artificial and its pathogenic power is increased by 5G antennas.

ON THE TRAIL OF PREVOTELLA

ANTIBIOTICS AGAINST A VIRAL INFECTION

Let us recall that we have indicated in the foregoing that the virus, once absorbed by the cells, modifies their genetic code (mutation) and converts them into multiplier and aggressor cells.

This process may well also involve an intestinal bacterium, Prevotella.

The presence of the Prevotella bacterium would enable the virus to infiltrate itself to bypass the immune system, escaping at the same time from screening.

The virus would kill not directly, but through an intestinal bacterium, Prevotella, which it would infect.

It is this infected bacterium that, become virulent, would trigger the immune hyperreaction that destroys the lungs and kills the patient.

This would explain:

- Why the treatment of Dr. Raoult, using an antibiotic (Azithromycin), and especially that of Dr. Sabine Paliard-Franco, who advocates a double antibiotic therapy, both work.
- Why children are spared and the elderly more affected: Prevotella is quite absent from children's intestinal flora, but more and more present with age.
- Why obese people are much more affected: their unbalanced intestinal flora contain a lot of Prevotella
- Why pulmonary complications occur when there is practically no Covid in the respiratory tract, the infected bacteria (found in the stool, containing Covid RNA and sometimes even live viruses) taking forward its initial (benign) attack in a much more dramatic way by triggering the inflammatory immune hyperreaction that drowns the lungs...
- Why the virus can reappear in a cured patient (with alternating positivity and

negativity of the tests), because the bacterium, still present in the intestinal flora, remains its host and can release it at any time.

In short, this consistency bodes well for the validity of the hypothesis.

There is therefore a confirmation of the relevance of Azithromycin as a curative therapy, to be prescribed **from the beginning of the infection** ... and even a promising path to preventative treatment of serious infections (coronaviruses ... and probably also flu!), this treatment involves the restoration of a healthy intestinal flora that neutralizes Prevotella.

(i.e. a good intestinal flora)

Regarding antibiotics, some advocate Metrodinazole + Spiramycin-Birodugyl (for intolerances, Amoxicillin + clavulanic acid (Augmentin), due to the fact that **Prevotella is very resistant to most antibiotics**. It is well known to pulmonologists and dentists for this reason. And it may be inferred that if Prevotella allows SARS-Cov-2 to resist our immune system, the virus also confers increased resistance to Prevotella.

Of course, this avenue has been refuted by AFP (Agence France Presse), which indicates that researchers who had initially reported on the responsibility of the Prevotella group of bacteria retracted and says that "there is no publication on this subject" and that this information has been "neither verified nor scientifically demonstrated to date".

It should be noted that there is also considerable pressure brought to bear on this issue.

"Professor Deprez is surprised to see the city of Lille mentioned: *'To my knowledge, nothing has been done in Lille to contribute to these results, neither at the Pasteur Institute, nor at the Teaching Hospital, nor at the National Medical Research Institute, nor at the Faculty of Sciences.'* These items do not appear out of nowhere. Publications linking Prevotella to the novel coronavirus definitely exist, but they are neither robust nor validated by the scientific community."

According to *Le Monde*, "no major discovery" has been made about the central role of Prevotella. "This theory was developed from unverified pre-publications, which are based in part on data likely to be erroneous. This rumour therefore has no serious basis."

As can be seen, it is very difficult to form an opinion on this issue.

However, beyond the mantra according to which "**there is no official scientific proof**" and "**no specific recommended treatment**", to the accompaniment of cannons roaring from the College of Doctors Governing Council, frontline doctors, manifestly sincere and visibly more concerned with the lives of their patients than with abstractions, courageously report that treatments are working.

One example is Dr. Jade Allegre. She advocates a treatment intended to treat the intestines (where Prevotella develops) and says that in Chinese medicine, the lungs and intestines are linked:

GREEN CLAY

The approach of Doctor Jade ALLEGRE

Dr. Jade ALLEGRE video: https://youtu.be/kczrY_-sZrk

Green clay is a traditional treatment yet is at the cutting edge of scientific research.

Dr. Allegre cites the case of the three first people cured of Covid-19 by green clay. She speaks of miraculous effects.

Of all the cases that followed the first three, 80% of patients were put right in two hours and 100% in 48 hours.

The clay must not be stopped as soon as one feels better. One should continue to take it for a month and a half, otherwise there is a resurgence.

Unheated clay, which is not denatured, should be taken.

Quarry Clay (35 kg for 7.50 euros) is very good.

Website: <http://jade-allegre.com/boutique/commande/evenements/?lang=en>

CORONAVIRUS: TWO CURATIVE TREATMENTS TO CHOOSE FROM

You already have signs compatible with Covid – difficulty getting air into your lungs, dry cough, loss of taste and/or smell, fever, pallor, exhaustion.

1. Green clay powder

USE A WOODEN OR PLASTIC SPOON (not metal).

2-3 times a day: put 2-3 tablespoons in a glass of water, take a minimum of two hours apart from any other medication, four if possible.
(1/2 dose under 5 years, 1/4 dose under 1 year).

Preparation: sprinkle in a glass of spring water if possible. Let stand for 5 minutes and then swirl and swallow all the contents (do not use metal container or utensil with clay).

Side effect: possible transient constipation, in this case ABSOLUTELY NO LAXATIVE, because the clay is healing your intestines. Stop the clay until the stool resumes naturally, then resume the clay.

Drink at least two hours apart from any other medication, ideally 4 hours.

2. Magnesium chloride (over-the-counter at the pharmacy)

Dilute 1 sachet of 20 grams in 1 litre of water, to drink within 24 hours, for as many days as necessary to stop the symptoms.

(1/2 litre under 10 years, 1/4 litre under 3 years).

It is possible to mitigate the unpleasant taste by putting in the refrigerator for a few hours and adding some lemon.

Side effect: diarrhoea, which is necessary – do not interrupt it.

SURVIVING IN THE CITY WHEN EVERYTHING STOPS, by Doctor Jade ALLEGRE

Get ALL the GREEN CLAYS available in your local stores and pharmacies. Prepare a test dose of each (1/2 teaspoon in 1/2 glass of water), the same day, and choose for your cure the one you prefer ... Listen to your body, rediscover your animal instincts! And keep the other clays for your external use ...

IF TAKING CLAY MAKES YOU CONSTIPATED, it means that your intestines were sick before the cure, and that the clay has stuck on your bowel wall to heal it: take absolutely no laxative! Stop taking the clay cure, and calmly wait for the transit to resume, then resume your cure.

You could possibly follow up with a probiotic cure to strengthen your intestinal flora even more.

Clay is a natural anti-poison, it has a strong absorbing power: it attracts poisons and it cleans the digestive system and clears the intestine. It cleans the digestive system and gets rid of toxins, germs, worms and pathogenic bacteria, without destroying the intestinal flora like antibiotics would.

It repairs the mucous membranes thanks to its healing and regenerating properties. It's an ally.

It's powerful against ulcers, inflammations and even intestinal porosity. The syndrome of the permeable intestine arises from a damaged bowel wall, which is no longer capable of correctly filtering the assimilated molecules. This potentially results in immune problems, various allergies, thyroid and skin problems. Clay is a key step in stopping this process and restoring the intestine.

"Its antiseptic properties optimize the regenerative functions of clay in purification and cellular reconstitution of damaged tissues until total healing takes place through an entirely natural process", explains Bernard Baudouin in his book "Clay and its Virtues".

Clay acts as an anti-inflammatory: bone, muscle, joints. Clay is also an asset in case of sciatica even internally, to unclog toxins on the targeted nerve.

BIOLOGICAL & ELECTROMAGNETIC WARFARE
CBRN [Chemical, Biological, Radiological And Nuclear]
ON THE TRAIL OF 5G

5G is presented as "a technological innovation with unprecedented performance".

However, this technology operates on the 3.4-3.8 GHz band, i.e. on giga-Hertzian frequencies that directly **interfere with human consciousness** (cytoskeleton structure of the brain) and which have been recognized by the WHO as "**probable human carcinogens**" (Group 2B) since the 31 May 2011 IARC press release (press release No. 208).

A "**gradual increase in power**" is planned for this band, which will reuse the frequency of BLR-WiMAX networks (local radio band) and use the grid of existing networks to achieve coverage similar to that achieved in 4G.

The government has given all latitude to operators to install additional antennas since the lockdown measures: to cope with the increased use of the Internet during lockdown, orders made under the state health emergency law authorize operators' new "radio installations". Operators can therefore "add bandwidth" by freeing themselves from the usual regulations.

Thus, the lack of obligation to inform local councils, and therefore users. Under the Emergency Health Act, "the obligation to transmit an information file to the mayor or the president of the largest cities and agglomerations of France with a view to the operation or modification of a radio installation" is suspended.

Emergency laws therefore facilitate the installation of 5G antennas.

However that may be, it seems unlikely that operators would pay to remove their facilities after lockdown, as one would like us to believe.

According to the GSMA [*Global System for Mobile Communications*] Association, which brings together more than 750 telecommunications companies from around the world, there is no evidence of health risks. This applies to users of mobile phones, as well as people who live near mobile phone antennas. It should be noted, however, that this sweeping statement by the operators – the same old story – is in clear contradiction to the WHO/IARC press release (No. 208 of 31 May 2011), which classifies these electromagnetic waves in Group 2B as "probably carcinogenic for humans", after the meeting of a working group of 31 researchers from 14 countries. This study focuses on the use of mobile phones, "wireless telecommunication devices", considered to be likely carcinogens. Exposure to mobile phone antennas is not even mentioned, the impact of which on the environment is undoubtedly exponential, especially considering the "increase in power" (sic) expected for this band. The 26 GHz band (already used for speed cameras and airport security gates) is being tested in Chatillon and Rennes.

Some information can be found on the ARIASE [*ARIASE is a broker specializing in Internet offers and mobile packages*] and ARCEP (French telecommunications and postal regulatory body) sites.

On the website of ARCEP (Regulatory Authority for Electronic Communications and Posts) can be found the logbook for the different phases of trials of 5G in the cities of Belfort, Bordeaux, Grenoble, Lannion, Lille, Lyon, Marseilles, Nantes, Toulouse or

Paris.

The fifth generation of wireless communication technology (5G), is, according to the telecommunications company Orange, "designed to meet the very high data growth and connectivity of modern society."

This new technology offers impressive data exchange and storage capabilities and virtually unlimited call volumes. For this, 5G uses an untapped millimetre wave (MMW) bandwidth between 30 and 300 GHz, as well as some low and medium frequencies.

5G technology is more efficient than 3G and 4G on many levels and opens up a range of possibilities for different areas of application:

- Faster navigation, with mobile telecommunications speeds multiplied. A speed of up to 100 gigabits of data per second, 100 times faster than the current 4G. Enough to fill a personal movie library in just a few seconds on the Internet, compared to several hours today.
- **Remote control of objects** is only possible if the latency time, i.e. the reactivity time of the network antennas, is significantly reduced.
- Currently, the latency time is around 35 milliseconds (ms) to one minute. 5G will reduce this to 1 ms, which is essential for remote control drones or connected cars. Thus it is to be noted that **5G implementation is a prerequisite for the generalization of drones intended to control everything**, that is to say for the establishment of a totalitarian society.
- Telemedicine expects a lot from the 5G revolution. For some years now, "remote-monitored" surgical operations have been piloted thousands of kilometres away, especially in developing countries where qualified medical personnel may be lacking. 5G technology should improve the quality of the transmitted image and increase the chances of successful operations. The improvement of health systems also requires a hyper-connection, which 5G makes possible. An innovative breakthrough that will enable, for example, better synchronization and increased communication between hospitals and better monitoring of patients' medical records.
- More unexpectedly, the mining sector hopes for much from the 5G revolution. This new technology is expected to significantly increase safety and productivity by reducing CO2 emissions. In Sweden, the Boliden Kankberg underground mine is a pioneer in this area. A 5G network has been installed as part of the EU-funded SIMS (Sustainable Intelligent Mining Systems) project. One of the concrete actions enabled by the 5G underground network is the use of drones to explore tunnels without risk to humans. Inspections of tunnels after blasting and landslides may be delegated to remote-controlled machines, whatever network disturbances there may be in the outside network. A win in terms of safety, time and therefore productivity.

However, whatever reservations one may have to the establishment of a world controlled by ubiquitous drones – which one seems to be heading towards, in disregard of public freedoms - the main concerns about the generalization of 5G come from the multiplication of mobile phone antennas emitting electromagnetic waves.

The increase in the number of antennas is explained by the fact that **millimetre waves pass poorly through hard materials. They are easily absorbed by buildings, rain and plants**, thus interfering with the signal. Furthermore, these high-frequency waves have much shorter wavelengths, which limits their propagation. To overcome this problem, **small cells have to be installed everywhere** in our environment (street lights, utility poles, houses, etc.).

Faced with this proliferation of transmitting antennas, many are questioning the

medium-to long-term effects of broadband on health.

There are two types of radiation: ionizing radiation vs. nonionizing radiation.

The former modifies DNA due to its wavelength (λ) such as UV, X-ray or gamma waves (γ), causing mutations that cause cancer. Non-ionizing radiation, such as electromagnetic waves, does not cause changes in DNA[*] but has a certain thermal effect, the long-term effects of which are probably underestimated.

[Translator's note: the literature on electromagnetic fields does not corroborate this statement.]*

These effects can cause damage to biological tissues through heating.

In France, the French National Frequency Agency (ANFR) and the French Agency for Food, Environmental and Occupational Health Safety (ANSES) are responsible for investigating the controversial risks of 5G. In 2011, a "Radiofrequencies and Health" Working Group" was created to measure the impact of exposure on the health of populations. The 2013 report did not highlight "proven health effects". ANSES also states that the overall exposure is "low in relation to the exposure limit values currently used".

However, the International Centre for Research on Cancer (IARC), which is part of the World Health Organization (WHO), classified radio frequencies from 30kHz-300 GHz (Gigahertz) as possible human carcinogens (Group 2B).

Annie Sasco, an environmental health leader and fierce opponent of 5G deployment, warns against the health risks of mobile phone antennas. Already in 2012, she revealed in an article in *L'Express* that the conclusion that there were no health risks could be biased by conflicts of interest. A trained Public Health physician, Annie Sasco worked at WHO for most of her career. She added in December 2018 on TV5 Monde, the "increased risk of brain tumours", especially for children, as well as the "damage" to insects and trees already observed.

The following is a useful website: <https://www.stop5g.ch/5g-et-contre-verites>. It notes that the circles of obviously pro-5G telecommunications companies, in conflict of interest, flood the press with biased information unrelated to the current state of scientific knowledge on the health impact of 5G.

It should be noted in particular that: "the effect of pulsed electromagnetic waves on human cells has been proven, confirmed by numerous studies. Secondly, the consequences for a person's state of health obviously differ: a cancer, for example, can have a multi-factorial cause. **DNA changes have nevertheless been observed in those living adjacent to antennas** at field values well below the limit value of 6V/m. Moreover, these DNA changes were recognized by Swisscom in its patent No. WO2004/075583.

It is undisputed that more than 240 scientists who have published peer-reviewed research on the biological and health effects of non-ionizing electromagnetic fields (EMFs) have signed the [International EMF Scientists' Appeal](#):

*"Many recent scientific publications have shown that **EMFs affect living organisms** at levels far below most international and national guidelines. Effects include increased risk of cancer, cellular stress, increased harmful free radicals, **genetic damage**, structural and functional changes in the reproductive system, learning and memory deficits, **neurological disorders**, and negative effects on overall human well-being. The damage goes far beyond the human, as there is increasing evidence of harmful*

effects on both plant and animal life."

The scientists who signed this appeal undoubtedly constitute the majority of experts on the effects of non-ionizing radiation. They have published more than 2,000 articles on electromagnetic fields in professional journals. The Federal Communications Commission (FCC) RFR [*radiofrequency radiation*] exposure limits regulate the intensity of exposure taking into account the frequency of carrier waves, but ignore the signalling properties of RFR.

Last year, a 30-million-dollar study by the US National Toxicology Program (NTP) revealed "clear evidence" that exposure to mobile phone RFR for 2 years increased the incidence of cancer in male rats and damaged DNA in rats and mice of both sexes.

In the same vein, Arthur Robert Firstenberg sent a petition to the WHO, the UN and the EU stating that "*the deployment of 5G constitutes an experiment on humanity and the environment characterized as a crime under international law*".

The national association for health security in wireless technologies refers to a 2004 study by [Lai and Singh on the cumulative effects of electromagnetic fields on DNA strand breaks](#) (Bioelectromagnetics Research Laboratory, Department of Bioengineering, University of Washington, Seattle, Washington 98195-7962, USA.)

Let's state this clearly:

- **5G electromagnetic radiation damages human cell DNA**
- **Exposed cells (of all kinds targeted in the human body) react by producing a cascade of protective immunological substances**
- **These substances are conditioned in an intracellular structure called endosome**
- **The endosome is expelled from the cell, thus becoming an exosome (Nobel Prize in Medicine 2013)**
- **The exosome circulates and binds to ACE2 receptors in the lung, intestine and heart.**

Immunological chemicals contained in the exosome penetrate ACE2.

The angiotensin-converting enzyme 2, or ACE2, is an enzyme linked to the outer surface of the plasma membranes of cells of the lung, arteries, heart, kidney and digestive system. It plays an important role in the renin-angiotensin-aldosterone (RAAS) system that regulates sodium and water homeostasis and blood pressure.

ACE2 is believed to be the entry point into human cells of certain coronaviruses, such as the human coronavirus NL63, Sars-CoV13 (the coronavirus causing SARS) and SARS-CoV-2 (causing COVID-19).

In addition, it should be noted that the timing of 5G deployments seems to coincide with the coronavirus occurrence maps and with the places where the incidence of the new coronavirus is highest, which has also caused public reactions in some countries aimed at destroying or setting fire to many mobile phone antenna masts (United Kingdom, Hong Kong). In this regard, YouTube removed all videos associating 5G with the spread of the coronavirus, as of the beginning of February 2019.

Nonetheless there is a correlation between the massive deployment of 5G and the sources of Covid-19 propagation, to be verified once the new maps become available showing the antennas installed during the lockdown according to the emergency laws.

And in fact the epidemic began in China, which is the promoter of 5G (10,000 antennas

in Wuhan, official 5G demonstration zone, late 2019), and Italy was not far behind in this deployment race, the big Italian cities being already fully equipped with 5G by the end of 2019. Lombardy (Milan) was one of the first Italian regions equipped with 5G and the region most affected by Covid-19: as the Italian newspapers headlined at the end of 2017, "Milan dreams of being the European 5G capital", Vodafone Italia having launched a 90-million-euro plan to cover 100% of the Italian economic capital in 2019.

Comparison of 5G deployment maps and hospitalized patients in France (the difference between the number of hospitalizations and the number of deaths resulting from a difference in the treatments applied, for example between Marseilles and Professor Raoult and the Grand-Est).

There were, officially and before the lockdown of 17 March 2020, 450 5G mobile phone antennas installed in France, in particular in the cities of Marseilles (95), in the Paris region (85), Montpellier (53), Lyon (22), Toulouse (22) and Bordeaux (22).

DISEASES RELATED TO ELECTROMAGNETIC FIELDS

First of all, it should be stressed that:

- The serious cases of COVID-19 are related to a phenomenon of thrombosis, as several frontline doctors have reported, we now know;
- This thrombosis results from cytokine shock, which is a process of inflammation, so an immune problem:
- Deep vein thrombosis (DVT) is a major cause of morbidity and mortality. While DVT has long been considered a blood clotting disorder, many people have demonstrated that the immune system and an inflammation process are responsible for thrombosis ("deep vein thrombosis (DVT) is a major origin of morbidity and mortality. While DVT has long been considered a blood coagulation disorder, several recent lines of evidence demonstrate that immune cells and inflammatory processes are involved in DVT initiation." *Immune factors in deep vein thrombosis initiation*): <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6065414/>

That being said, let us examine the pathologies specifically related to exposure to electromagnetic fields, which are suspected in the strong presumption of a link between the patients hospitalized for COVID-19 and deployment of 5G infrastructure:

For this we will refer to a [*Bibliography of reported biological phenomena \('effects'\) and clinical manifestations attributed to microwave and radio-frequency radiation*](#). Naval Medical Research Institute MF12.54.015-004B, Report No. 2 revised. 106 PP. [NOTE: This document has been reduced to 25 pages so that we can publish it here and does not contain all 2,311 references.]

"More than 2000 references on the biological responses to radio frequency and microwave radiation, published up to June 1971, are included in the bibliography. Particular attention has been paid to the effects on man of non-ionizing radiation at these frequencies. [...]"

Note: This document is not classified.

SIGNIFICANCE

The value of the Glaser 1972 document is to counter the statements that “credible” research does not exist showing non-thermal effects. This is a false statement promoted by those who are either unaware of the literature or unwilling to admit this radiation, at levels to which we are currently exposed, can be harmful.

Credible research does exist; it has been around for decades; and it has been largely ignored by those responsible for public and occupational health.

COMMENTS

This is one of the first large scale reviews of the literature on the biological effects of microwave and radio frequency radiation and it first appeared in 1971. The author classified the biological effects, into 17 categories (see below).

While it is clear that radiation that causes heating can also cause secondary effects, not all the effects listed above are heat-related. Indeed, much of the literature at the lower exposure levels is **unrelated to heating**. This is the type of research that helped regulators to formulate their microwave guidelines. **The non-thermal studies have been ignored by the World Health Organization**, upon which many countries look for guidance, and hence the guidelines differ by orders of magnitude from the lowest in Salzburg, Austria[*] (0.1 microW/cm²) to the highest (5,000 microW/cm² for occupational exposure) established by [ICNIRP](#) (International Commission on Non-ionizing Radiation). This is a 50,000 times difference!

[Translator's note: the values proposed for Austria by the Salzburg Health Authority have never been implemented. In fact, the whole of Austria follows the ICNIRP guidelines.]*

One way to interpret this is that we have two guidelines, one to prevent heating and, a more restrictive guideline, to prevent **biological effects**, some of which can have serious health consequences.

What is striking is that what we used to call microwave sickness (group of symptoms associated with radar workers) has been called neurasthenia (feeling unwell) and is now called electrosensitivity. In all cases the symptoms are associated with exposure to radio frequency radiation initially radar; then RF heat sealers and computers; and more recently various sources of wireless technology including mobile phone, broadcast, and WiFi or WiMax antennas, wireless routers, smart meters, etc.

The specific biological and health effects, provided in Glaser 1972, are listed below.

A. Heating of Organs* (Applications: Diathermy, Electrosurgery, Electrocoagulation, Electrodesiccation, Electrotomy)

This includes heating of the whole body or part of the body like the skin, bone and bone marrow, lens of the eye with cataracts and damage to the cornea; genitalia causing tubular degeneration of testicles; brains and sinuses; metal implants causing burns near hip pins etc. These effects are reversible except for damage to the eye.

B. Changes in Physiologic Function

This includes contraction of striated muscles; altered diameter of blood vessels (increased vascular elasticity), dilation; changes in oxidative processes in tissues and organs; liver enlargement; altered sensitivity to drugs; decreased spermatogenesis leading to **decreased fertility and to sterility**; altered sex ratio of births in favor of girls; altered menstrual activity; altered fetal development; decreased lactation in nursing mothers; reduction in diuresis resulting in sodium excretion via urine output; altered renal function; changes in conditioned reflexes; decreased electrical resistance

of skin; changes in the structure of skin receptors; **altered rate of blood flow**; altered biocurrents in cerebral cortex in animals; changes in the rate of clearance of tagged ions from tissues; reversible structural changes in the cerebral cortex and diencephalon; changes in electrocardiographs; altered sensitivity to light, sound, and olfactory stimuli; functional and pathological changes in the eyes; myocardial necrosis; **hemorrhage in lungs**, liver, gut and brain and generalized degeneration of body tissue at fatal levels of radiation; loss of anatomical parts; death; dehydration; altered rate of tissue calcification.

C. 100 Central Nervous System Effects

This includes headaches; insomnia; restlessness (daytime and during sleep); changes in brain wave activity (EEG); cranial nerve disorders; pyramidal tract lesions; disorders of conditioned reflexes; vagomimetic and sympathomimetic action of the heart; seizure and convulsions.

D. Autonomic Nervous System Effects

Altered heart rhythm; **fatigue**, structural alterations in synapses of the vagus nerve; stimulation of the parasympathetic nervous system leading to Bradycardia and inhibition of the sympathetic nervous system.

E. 500 effects on the peripheral nervous system

Effects on the locomotor nerves.

F. Psychological Disorders

Symptoms include neurasthenia (general bad feeling); depression; impotence; anxiety; lack of concentration; hypochondria; dizziness; hallucinations; sleepiness or insomnia; irritability; decreased appetite; loss of memory; scalp sensations; fatigue; chest pain, tremors.

G. Behavioral Changes in Animals Studies

Effects include changes in reflexive, operant, avoidance and discrimination behaviors.

H. Blood Disorders

Effects include changes in blood and bone marrow; increased phagocytic and bactericidal functions; increased rate of hemolysis (shorter lifespan of cells); increased blood sedimentation rate; decreased erythrocytes; increased blood glucose concentrations; altered blood histamine content; changes in lipids and cholesterol; changes in Gamma Globulin and total protein concentration; changes in number of eosinophils; decrease in albumin/globulin ratio; altered hemopoiesis (rate of blood corpuscles formation); leukopenia (increased number of white blood cells and leukocytosis; reticulocytosis (increase in immature red blood cells).

I. Vascular Disorders

This includes **thrombosis** and hypertension.

J. Enzyme and Other Biochemical Changes (in vitro)

Changes in the activity of cholinesterase (also in vivo); phosphatase; transaminase; amylase, carboxydismutase; denaturation of proteins; inactivation of fungi, viruses, and bacteria; killed tissue cultures; altered rate of cell division; increased concentration of RNA in lymphocytes and decreased concentration of **RNA** in brain, liver and spleen;

changes in pyruvic acid, lactic acid and creatinine excretions; changes in concentration of glycogen in liver (hyperglycemia); altered concentrations of 17-ketosteroids in urine.

K. Metabolic Disorders

Effects include glycosuria (sugar in urine); increase in urinary phenols; altered processing of metabolic enzymes; altered carbohydrate metabolism.

L. Gastro-Intestinal Disorders

Effects include anorexia; epigastric pain; constipation; altered secretion of stomach digestive juices.

M. Endocrine Gland Changes

Effects include altered functioning of **pituitary gland**, **thyroid gland** (hyper-thyroidism and enlarged thyroid, increased uptake of radioactive iodine), and adrenal cortex; **decreased corticosteroids in blood**; decreased glucocorticoid activity; hypogonadism (with decreased production of testosterone).

N. Histological Changes

Changes in tubular epithelium of testicles and gross changes.

O. Genetic and Chromosomal Changes

Effects include chromosomal aberrations (shortening, pseudochiasm, diploid structures, amitotic divisions, bridging, "stickiness"; irregularities in chromosomal envelope); mutations; mongolism; somatic alterations (not involving nucleus or chromosomes); neoplastic diseases (tumors).

P. Pearl Chain Effect

This refers to intracellular orientation of subcellular particles and orientation of cellular and other (non-biologic particles, i.e. mini magnetics) affecting orientation of animals, birds, and fish in electromagnetic fields.

Q. Miscellaneous Effects

These include sparking between dental fillings; **metallic taste in mouth**; changes in optical activity of colloidal solutions; treatment for syphilis, poliomyelitis, skin diseases; loss and brittleness of hair; sensations of buzzing, vibrations, pulsations, and tickling about head and ears; copious perspiration, salivation, and protrusion of tongue; changes in the operation of implanted cardiac pacemakers; changes in circadian rhythms.

5 July 2010. Glaser, Z. R. 1972.

Sources:

Magda Havas: *More than 2000 Documents prior to 1972 on Bioeffects of Radio Frequency Radiation*: <https://magdahavas.com/from-zorys-archive/pick-of-the-week-1-more-than-2000-documents-prior-to-1972-on-bioeffects-of-radio-frequency-radiation/>

Ciel Voilé: *Effets biologiques des ondes électromagnétiques : plus de 2000 publications avant 1972*: www.cielvoile.fr/2017/10/effets-biologiques-des-ondes-

In the face of the fact that the WHO continues to state that no treatment is recommended, frontline doctors have applied protocols that appear to be effective, at the risk of incurring the wrath of the College of Doctors Governing Council.

SOME RELEVANT EMPIRICAL TREATMENTS	
Hydroxychloroquine + Azithromycine	Didier Raoult (France), Steven Smith (USA)
Hydroxychloroquine + Azithromycine + Zinc sulphate	Zev Zelenko (USA).
Azithromycine + Singulair + Zinc	Médecins de l'Est , Philippe de Joux
Chloroquine + Doxycycline	Long Island Doctor (USA)
Macrolide + C3G	Sabine Palliard-Franco (France)
Azithromycine + Effizinc + Singulair + Heparin	Three general practitioners (France)

Each individual will, according to his or her understanding and judgement, have an opinion on the **consistency of symptoms between Covid-19 and pathologies linked to exposure to microwaves**, as well as on the **divergence between the recommendations of medical authorities (WHO, national health agencies) and the protocols applied by frontline doctors** who are visibly more concerned to remain faithful to the Hippocratic Oath than to respect sometimes astonishing rules.

9. THE PSYCHOLOGICAL DIMENSION

Certain confusing aspects of this issue, added to the fact that the artificial nature of this virus has been widely discussed, have resulted in severe criticism of the management of this health crisis. The word treason has been used and an undeniable suspicion has set in towards leaders held responsible for the fate of populations.

However, no matter how legitimate the anger may be, it is important to state on the subject we are dealing with here that these emotions literally poison the environment of their author and rebound on him or her loaded with the potential for self-destruction.

It is the same with emotions of fear. This is what folk wisdom calls "making bad blood". And so it is also with anger, which also opens the door to disease.

Stress results in a constantly high level of cortisol and a leakage of minerals.

In addition to the usual psychosomatic disorders (depression, migraines, blood pressure, skin diseases – eczema, psoriasis – heart problems, respiratory disorders, gastric disorders, some liver disorders), oxidative stress represents a real danger to health. It promotes the aging of cells. Cancer is an emotional disease; it often appears as a result of an "intense and permanent conflict" or as a result of emotional shock (grief, separation, loss of employment).

That is why it is essential to be alert to what these events arouse in us.

In addition, anti-oxidants help to combat free radicals generated by stress. The main antioxidants are: bioflavonoids (quercetin), carotenoids, vitamins C and E, and selenium.

Whatever the scale of our challenges, let us remember that a small flame is enough to dispel the darkness of a room. And that little flame is in us.

In the darkest hours of human history, hope has always stood as a bulwark against defeatism. Today, this hope is called trust in life.

Our body is more resilient than we think, and we are full of unexpected strength, provided we keep a positive mindset.

ANXIETY – STRESS

Psychological impacts of the epidemic and quarantine

Anxiety, stress, distrust, trauma ... Living in the context of an epidemic like coronavirus can have psychological repercussions.

What psychological effects?

Living in an epidemic context is obviously not neutral from a psychological point of view; we must understand that a global epidemic is a traumatizing event whether we are directly or indirectly concerned: IT DIRECTLY CONFRONTS US WITH DEATH, or at least with the threat of death.

This type of event can generate a strong emotional load that is very difficult to control, which can have many psychological repercussions: emotional fatigue, sleep disorders, ceaseless worrying about the future, fear of others, impaired judgment, mood disorders, tendency to hypochondria ... It is this battery of psychological repercussions that we find has affected us since the beginning of the COVID-19 epidemic. This epidemic situation can affect everyone's mental health in one way or another and we each have our own way of reacting.

Some people may feel overwhelmed by events and do not understand what is happening, while others may experience fear or anxiety on a daily basis.

Some have measured and thoughtful reactions, while others react more extremely.

Reactions therefore depend on many factors, such as our exposure to the epidemic, our previous experience of stressful events, the support of the people around us, our physical health, our age, our personal history of mental health challenges.

Isolation, quarantine: what psychological consequences do they have?

First consequence: stigmatization or the sense of being a person to be avoided.

Quarantine or forced isolation is not a trivial experience.

The first consequence of isolation is stigmatization, in other words, the feeling of being pointed at, constantly raising suspicion, being the plague-ridden person to be avoided or the person through whom the disease occurs. In addition to this impression of being rejected, some quarantined people may also have the feeling of guilt for not taking the

necessary measures and having potentially infected the people around them.

Quarantine is a potentially traumatizing experience.

Quarantine is therefore a potentially traumatizing experience for some and, like any trauma, symptoms (such as sleep disorders, mood disorders, generalized anxiety, up to depression or even post traumatic stress disorder) can manifest themselves much later, even months or years later "in the form of flashbacks, panic attacks, pathological alertness or hyper-vigilance".

Are there people at risk?

There is no typology of the person who would present more risks of psychological decompensation than another.

If someone has a tendency to hyper-anxiety, if someone is a hypochondriac or going through a depressive episode, what support is available?

Psychological support is essential to help overcome these impacts on mental well-being. Whether or not someone is directly concerned by the epidemic or not, he or she should not hesitate to talk about it to a health professional, even if the taking that action seems difficult, whether he or she wants to avoid the subject or feels ashamed at not managing to carry on as normal, depending on the symptoms and the level of trauma, the adult or the child can resort to a "CRISIS CELL", a mechanism that practises psychological medicine.

The purpose of this psychological or moral support cell is to identify the most vulnerable people and to refer them as soon as possible to specialists for a more individualized follow-up.

Short therapies such as cognitive and behavioural therapies (CBT) seem well suited to this kind of situation, but there are other methods such as hypnosis, Eye Movement Desensitization and Reprocessing (EMDR) ...

How not to give in to psychosis.

Above all, one must protect oneself and the people around one by adopting simple behaviours recommended by the health organization.

The spread of COVID-19 is certainly very worrying, but in order not to give in to excessive anxiety, one must avoid imagining catastrophic scenarios and do everything possible to put aside negative thoughts while remaining alert and vigilant.

The best way of distancing oneself from worries is to limit the sources of information.

Spending one's time reading terrifying warning notices, listening to the radio or watching 24-hour news channels are anxiety-provoking activities that promote panic. One must continue living a normal life while taking the necessary precautions to avoid contamination.

10. PUBLICLY AVAILABLE NATURAL HEALTH CARE: RESTORING TRUST IN NATURE

- It has to be acknowledged that many treatments and means of protection have been made inaccessible to the public. It is impossible not to mention this aspect.

- Nor is it superfluous to note that the World Health Organization continues to officially state that "to date, no specific drugs are recommended to prevent or treat infection with the new coronavirus."
- In the absence of an official preventative or curative treatment, the individual left to his own devices could usefully turn to natural therapies and put his or her trust once more in nature and life.
- **Natural medicines**, which are more readily available to the public, are still generally available (in pharmacies, in wholefood stores, on the Internet or in nature).

These therapies are therefore especially useful in the event of a "breakdown of normality".

Thus, a shortage or an administrative ban on certain conventional treatments, regulated overnight as in the present case, while at the same time it is officially declared that "no specific drug is recommended" places the public in a situation of "survival".

In this situation, when conventional treatments are unavailable to the public

- Either due to a disruption in supply chains (out of stock)
- Or in the case of a sudden administrative ban, one can turn to the following as alternatives:

- Aromatherapy (the most powerful form of phytotherapy)
- Homeopathy
- Phytotherapy
- Nutritional supplements and healthy living practices
- A healthy diet
- Meditation
- Sport
- Etc.
- The Japanese practice of "forest bathing" (shinrin yoku), which has proven therapeutic effects. If you have the chance to quarantine yourself near a natural area, going to recharge your batteries in nature is essential in terms of energy and healing.
- Let us reiterate that our way of life and our inner attitude greatly influence our immune system.
- It should be noted that in naturopathy, fever is considered a defence mechanism of the body: by naturally increasing its temperature, the body destroys most pathogenic micro-organisms.
- Inflammation is also a normal response of the body. However, as we have emphasized, nothing about this virus is natural or accidental.
- When turning to nature to heal us, it is important to continue to ensure maximum hygiene.
- Prevention is better than cure.
- And also let's remember that fear and anger – however legitimate – distract us from our true strength.

AROMATHERAPY

We are told that we are dealing with a virus.

The official thesis of "pneumonia" does not seem to be validated by observation.

The viral infection results in a number of symptoms varying from case to case, which can cause cytokine shock and inflammation degenerating into generalized thromboembolism, particularly pulmonary, with the possibility of multiple organ failure.

- It's a question then of:
 - Viral infection
 - Inflammation (cytokine shock)
 - Cardiovascular problems (vascularity)
 - Even neuropathy (which is inflammation of the nerve endings)

In all logic, therefore, action should be taken:

- **By anti-inflammatory action** (while ensuring a good immune system)
 - Complementing possibly with **antibacterial action** (in case of co-infection)
 - While **decreasing the viral load** (antiviral action)
 - **And ensuring good blood circulation.**

In this context, several studies show that essential oils have great antiviral power against RNA and DNA viruses. They can be used to disinfect hands, clean the environment and support the immune system:

Feedback tends to confirm the efficacy of antiviral essential oils on SARS-CoV-2 CORONAVIRUS, especially orally and in the form of inhalations (associated with heat).

The emergence of cytokine shocks implies that **anti-inflammatory essential oils (such as Scots pine and wintergreen)** are likely to be included in the protocol.

The existence of cardiovascular disorders (generalized thromboembolism mainly pulmonary) suggests that **essential oils preventing the formation of clots (such as Italian Helichrysum or "Immortelle")** could also be combined with antiviral treatment.

- ANTIVIRAL AND ANTIBACTERIAL CHEMOTYPED ESSENTIAL OILS (CTEOs):

There are a large number of antiviral CTEOs, of which some better known than others will go out of stock more quickly: see the list below

These oils are to be taken orally only in diluted form: 3 or 4 drops on a sugar cube or in a spoon of olive oil or honey.

They can also be taken in inhalation (3 drops in the hottest water possible - the virus does not like heat, for example 2 drops of an antiviral CTEO below and 1 drop of PEPPERMINT to decongest the nasal cavities).

They can also be taken percutaneously (3 drops on the wrists and rub the wrists together – they quickly pass into the blood), but according to experts this method of administration is somewhat less effective.

CTEO ANTI-INFLAMMATORIES:

- They are to be taken orally or by inhalation (Scots pine)
- They can also be taken transdermally, on the wrists as indicated above or by massage on the back (e.g. Scots pine and wintergreen, diluted in a dab of LLR-G5 GEL or vegetable oil). Do not exceed the prescribed doses.
- www.llrg5.com/fr/silicium-organique-g5

- It is of note that LLR-G5, in addition to its anti-cancer properties, potentiates the action of essential oils while diluting them.

CTEOs as preventative treatment for thrombosis:

- To be taken transdermally (Italian Helichrysum or "Immortelle").
- HELICHRYSUM ITALICUM (SSP SEROTINUM): a plant from south-western Europe that grows in sandy, dry, sun-exposed soils. The yellow flowers produce through distillation a rare and exceptional essential oil that exhibits the most powerful anti-haematoma activity in the plant kingdom. It is also antiphlebotic, antispasmodic, astringent and wound-healing. It is used against varicose veins, rosacea and thrombosis.
- www.doc-developpement-durable.org/file/Plantes-Medicinales-Aromatiques/Herbs_spices_and_essential_oils.pdf

ANTI-VIRAL PROPERTIES OF ESSENTIAL OILS:

Among antivirals and immunostimulants, the leader is the essential oil Ravintsara (Cinnamomum camphora).

It has a clearly established antiviral activity thanks to active ingredients, of which the main ones are terpene oxides (1,8-cineole), terpene alcohols (alpha-terpineol) and terpenes (pinenes).

It also has molecules similar to those of eucalyptus, which explains that added to its antiviral action is an anti-catarrhal action that is very useful in case of digestive or ENT viruses, which trigger catarrh.

Ravintsara has also been found to have a welcome antibacterial action since viruses and bacteria are often associated (the virus opens the door to bacterial infections). The virus has the possibility of getting in due to weakened immune defences. The essential oil will act by increasing these defences, in this case, immunoglobulins A and M (IgA and IgM). The underlying mechanisms of this life-saving plant are not yet understood, but their effects have been measured.

We now have the biological and clinical evidence, through numerous studies, of its formidable effectiveness.

Ravintsara therefore has all-risk coverage in infectious diseases.

Essential oils are now widely studied in research centres around the world: there is practically no university that does not have a unit devoted to this study.

Some areas are of particular interest to today's researchers.

A research centre in Australia has measured the virucidal activity of tea tree essential oil on the H1N virus, with promising results.

Other studies have been conducted on the action of peppermint essential oil on the herpes virus (HSV1 and HSV2): a contact of less than 24 hours between these viruses and peppermint essential oil eliminates them.

Other research is under way on coronaviruses, coxsackievirus, mononucleosis virus and hepatitis B virus (HBV). The action of the Ceylon cinnamon (bark) essential oil on the tuberculosis mycobacterium (Koch Bacillus) and the effects of the eucalyptus polybractea CT cryptone essential oil on the human papillomavirus (HPV) are also being studied.

In the field of immunity, fighting cold infections [*as opposed to hot infections*] with aromatherapy needs to be explored. For chemical treatments are virtually powerless against these because they do not manifest themselves clearly and undermine silently, whereas we had previously been used to bacteria which give clear symptoms, hot infections with fevers and catarrh, calling for known immune reactions.

We harbour a lot of bacteria in us, E. Coli, Klebsiella, Bacillus, Staphylococcus, Streptococcus, Borrelia, etc... which are essential to our metabolism in which they actively participate.

In excess, however, they turn against us and put us at their mercy.

Food, stress and environmental pollution are responsible for these imbalances, with essential oils coming to our rescue if we can listen to and trust them, while we are only now beginning to decipher them.

Fungi, bacteria, viruses: essential oils have the means to fight them all. Not to mention the value of a lighter, more flexible, more individual management of the specificities of the patient.

- For aromatherapy, refer to the authoritative booklet:
 - *HUILES ESSENTIELLES CHEMOTYPEES aromathérapie scientifique*, by A. ZHIRI Docteur ès sciences, D. BAUDOUX, pharmacist & aromalogist, ML BREDAS ISBN 2-919905-27-9. [*for similar in English*]
 - [*See also the website of the Australian College of Aromatherapy (ACOA) and its glossary of essential oils:*
<https://acoa.com.au/pages/glossary-of-essential-oils>]
- **Caution: most CTEOs are to be avoided for pregnant women in the first three months of pregnancy, and for children under 6 years.**
- For young children, it is preferable to use Ho Wood or Rosewood CTEOs as antivirals: 2 drops 3 times a day in honey, olive oil or on a sugar cube under the tongue.
- Some oils are abortive (Wintergreen), can cause burns (Chinese cinnamon) or hypothermia if used on large areas (Peppermint). a test for an allergic reaction must always be carried out before use, for example by putting a drop of diluted CTEO on the wrist before use.
- Before using essential oils, it is indispensable to check the precautions for use.
- It would be ideal, of course, to undergo training in aromatherapy.

- The CTEOs **Laurus nobilis**, Juniperus oxycedrus ssp. oxycedrus, Thuja orientalis, Cupressus sempervirens ssp. pyramidalis, Pistacia palaestina, Salvia officinalis, and Satureja thymbra have been found to have an inhibitory action on SARS-CoV and HSV-1 activity. These CTEOs are characterized by the presence of **β-ocimene**, **1,8-cineole**, **α-pinene**, and **β-pinene** as essential constituents. (*Phytochemical Analysis and in vitro Antiviral Activities of the Essential Oils of Seven Lebanon Species*. Monica R. Loizzo, Antoine M. Saab, Rosa Tundis, Giancarlo A. Statti, Francesco Menichini, Ilaria Iampronti, Roberto Gambari, Jindrich Cinati, Hans Wilhelm Doerr).

- In an interview conducted on 16 March 2020, **Dr. Pierre Franchomme**, father of aromatherapy, states that "Covid-19 is the same type of virus as SARS which has undergone some modifications. Both belong to the same family, with a different kind of serotype. The epidemic is in full development and information is

gradually feeding back. But in general a virus still has a very specific tropism. For some it will be the respiratory mucosa, for others it will be the hepatic parenchyma, in principle each virus has its own target of choice. There are small mutations between, for example, the coronavirus of China and that of Saudi Arabia, each time giving slightly different pathologies. It is a virus that nevertheless seems relatively stable, from what I have been able to understand it has a fairly long RNA, or nucleic acid, not allowing it to mutate too much. Although other viruses have the ability to mutate enormously, the coronaviruses found in China or South America are very similar. By contrast, there are things that we do not know yet, are there small mutations that make it more virulent in some people, or are these people more vulnerable? We don't have all the answers yet. It's still being studied.

- Initially it is a pseudo-influenza syndrome, although obviously it is not at all the same virus as the flu. The coronavirus is contracted through the respiratory tract, so the upper mucosa is affected, then it quickly falls on the bronchi and lower lungs, attacking the alveoli and quickly causing a form of pneumonia. Note that a simple flu can also lead to these kinds of consequences and cause low infections, but less typically than coronavirus.
- Magnesium, which is really indispensable in the fight against viral diseases, whatever they are.
- Viruses are simply genetic material, in this case RNA (10), and this one, I mean the coronavirus, is contained in a membrane, that is to say it is encased.
- **Now this envelope is composed of phospholipids, which are extremely vulnerable to the volatile organic components of essential oils. Which means that all essential oils are going to have an action against this type of encased virus, with obviously differences in the intensity of this action according to the oils used.**

The less specific ones will be weaker, while the more specific ones will be stronger.

In the current state of knowledge, we can already advocate *Eucalyptus Globulus*, which is active against this type of virus. (...)

I am recommending **Laurus Nobilis** and **Eucalyptus Globulus**. It is just important to choose an unrectified Eucalyptus oil. Because most of the time Eucalyptus oils are rectified to increase the level of eucalyptols, which is absurd because other molecules present are also very active on viruses. It is therefore important to opt for non-denatured or artisanal oils. As well as the **Laurus Nobilis essential oil, which is extremely active in the pathology of coronavirus**, as in many other viral diseases.

(...) It is necessary to reach the place where the virus develops. To reach the lower part of the lungs, where capillary contact with the alveolar mucosa is located, one can act through the blood, and through the intravenous route in particular. Therefore, it will be necessary to massage the essential oil in places where a large venous network is located.

The first is the **soles of the feet**, it seems paradoxical but under the soles of the feet is a venous network called the Lejars venous sole of the foot, which permits the almost instantaneous passage of oils that will circulate on protein vehicles in the blood, pass into the systemic circulation, reach the heart, and from the heart go directly to the lungs.

A second important location is through the haemorrhoidal vein, either with suppositories, or simply with the help of rectal oils. In this second case it can be said that in a few minutes the essential oils will already be present at the level of the lungs.

A final option would be to apply them at the wrists, where the visible veins are located. But when the pathology is established, I would say that the rectal route is the safest strategy, especially in severe cases."

- Jean-Baptiste Loin: "*Does the international scientific discourse on coronavirus seem to you limited solely to the avenues of conventional medicine?*" "Yes, completely." "(...) "The obligation is to remain within the official protocols. But in terms of the case that we are concerned with now, the problem is that there is no protocol since there is no approved therapy. (...) The huge difference between vaccines and essential oils: the vaccine focuses on a given strain, while essential oils can act on all strains to the extent that they pass by another channel. That is, by means of deconstruction, among other things, of the envelope of the virus.



ESSENTIAL OILS HAVING PROPERTIES USABLE IN THE CASE OF A PROPOSED PROTOCOL AGAINST COVID-19

! = see precautions for use

NOTE: Prohibited in all cases for women up to 3 months pregnant.

NB. The applicable protocol will need to be adapted to the stage of progress of the disease. Essential oils that have interesting properties but are haemostatic have been excluded for use in the present case, taking into account the risks of thrombosis (such as Geranium (Egypt), which is an effective antibacterial and anti-inflammatory but which has haemostatic properties, or Geranium Rosat cv Bourbon).

NOTE: Essential oil does not dissolve in water, but only in oil. In case of incident, dilute with oil!

ANTIVIRALS	POTENT ANTIVIRALS
HO WOOD (children)	! EUCALYPTUS GLOBULUS (recommended by Dr. Pierre Franchomme)!
ROSEWOOD (children)	CLOVE OIL
! EXOTIC BASIL	! LAURUS NOBILIS
!! CEYLON CINNAMON (BARK)	SARO (Mandravasatrotra)
!! CHINESE CINNAMON	MARJORAM CT THUJANOL
CISTUS LADANIFER !! haemostatic !!	NIAOULI
MADAGASCAR CITRONELLA	! OREGANO
! LEMON TREE	PALMAROSA
CORIANDER	RAVINTSARA
EUCALYPTUS RADIATA	! MOUNTAIN SAVORY
LAVENDER ASPIC	TEA-TREE
! MENTHA ARVENSIS	! THYME-LEAVED SAVORY
! PEPPERMINT (hypertensive, vasoconstrictive) !!	THYME LINALOOL
	THYMUS VULGARIS CT THUJANOL
	! [THYMOL? – translation not found]

For English readers, see website: <https://draxe.com/essential-oils/essential-oils-guide/>

ANTI-INFLAMMATORIES	POTENT ANTI-INFLAMMATORIES
! EXOTIC BASIL	LEMON EUCALYPTUS
ROMAN CHAMOMILE (CHAMAEMELUM NOBILE)	!! WINTERGREEN
WILD CARROT	! JUNIPERIS COMMUNIS
! JAVA CITRONELLA (percutaneous anti-inflammatory)	SCOTS PINE (cortisone mimetic)
! BLACK SPRUCE (cortisone mimetic)	LEMON VERBENA (may be taken internally with 30% dilution)
! TARRAGON	
EUCALYPTUS RADIATA	
[WINTERGREEN GAULTHERIA FRAGRANTISSIMA ? – translation not found]	
KATAFRAY (anti-histamine effects)	
LAVENDER SUPER	
! GREENLAND LEDON	
MASTIC TREE	
! LEMON LITSEA	
! PEPPERMINT (hypertensive, vasoconstrictive) !!	
! HIMALAYAN SPIKENARD	
PATCHOULI	
PETITGRAIN BITTER ORANGE	
RAVENSARE AROMATICA	

ANTI-BACTERIALS	POTENT ANTI-BACTERIALS
HO WOOD (children)	!! CEYLON CINNAMON
ROSEWOOD (children)	!! CHINESE CINNAMON
MADAGASCAR CITRONELLA	CLOVE
! LEMON TREE	LAURUS NOBILIS
CORIANDER	SARO (Mandravasarotra)
! BLACK SPRUCE (cortisone mimetic)	-
EUCALYPTUS GLOBULUS	! MARJORAM CT THUJANOL
[! EUCALYPTUS MENTHOL – translation not found]	NIAOULI (selective anti-bacterial)
EUCALYPTUS RADIATA	! OREGANO
! FRAGRANT INULA	PALMAROSA
LAVENDER ASPIC (average)	RAVINTSARA
LAVENDER SUPER (variable, calming)	! MOUNTAIN SAVORY
! MENTHA ARVENSIS	TEA TREE (powerful broad-spectrum antibacterial radioprotective for the skin)
! PEPPERMINT (hypertensive, vasoconstrictive) !!	! THYME-LEAVED SAVORY (major antibacterial with broad-spectrum action)
! HIMALAYAN SPIKENARD	THYME LINALOOL
PETITGRAIN BITTER ORANGE (average anti-bacterial)	THYMUS VULGARIS CT THUJANOL
SCOTS PINE (average anti-bacterial)	[! THYME CT THYMOL OIL – exact translation not found] (antibacterial with broad-spectrum action)
ROSEMARY CT CINEOLE (average anti-bacterial)	

BLOOD THINNERS	POTENT BLOOD THINNERS
! CEDARWOOD ATLAS	IMMORTELLE (Italian Helichrysum) (! Internal use solely as advised by therapist !)
! LEMON TREE	NIAOULI (venous decongestant, radioprotective for the skin)
!! CYPRESS (Cupressus sempervirens)	THYMUS VULGARIS CT THUJANOL (warms circulation)
! GINGER	
MASTIC TREE	
! MARJORAM CT THUJANOL (warms circulation)	
! HIMALAYAN SPIKENARD (phlebotonic)	
GRAPEFRUIT (peel)	
PATCHOULI	
! YELLOW SANDALWOOD	
! CLARY SAGE (Salvia sclarea) (circulatory regulator)	

IMMUNOSTIMULANTS	IMMUNOSTIMULANTS ++
!! CEYLON CINNAMON	CLOVE
!! CHINESE CINNAMON	SARO (Mandravasarotra) (immunomodulating)
CISTUS LADANIFER !! (haemostatic, immunoregulating) !!	! MARJORAM CT THUJANOL (immunostimulant)
EUCALYPTUS RADIATA	! OREGANO
LAVENDER ASPIC	PALMAROSA
	HEMLOCK
	RAVINTSARA
	! MOUNTAIN SAVORY
	TEA TREE

	! THYME-LEAVED SAVORY (immunoregulating)
	THYMUS VULGARIS CT THUJANOL (immunostimulant)
	[! THYME CT THYMOL OIL ? – exact translation not found]

FACT SHEETS ON ESSENTIAL OILS

Some essential oils may be usefully included in a first aid kit or family pharmacy, in addition to their use against the Covid-19 pandemic.

Below you will find the fact sheets on some of the most useful essential oils.

The most interesting properties for the current case are highlighted in bold font.

Those that may be problematic are underlined.

CTEOs that are radioprotective for the skin are highlighted in bold, due to the propensity of 5G (mobile phone antennas whose development coincides with the pandemic) to severely weaken the immune system.

To use essential oils, it is indispensable to refer to [a reputable manual such as the following or similar:

Essential Oils Pocket Guide (17 Dec. 2019) by Dr. Josh Axe, Jordan Rubin and Ty Bollinger.]

To follow a course in aromatherapy [seek a professional body in your country such as the following:

The Aromatherapy Council (The Lead Body for the UK Aromatherapy Profession)
<https://www.aromatherapycouncil.org.uk/>
 Aromatherapy Institute, Inc.
<http://aipograms.org/>

RAVINTSARA <i>Cinnamomum camphora ct cineole</i> (Warning: not to be confused with Ravensare)	
Aromatic molecules	Sabinene, 1,8-cineole, alpha-terpineol
Properties	Antiviral and immunostimulant antibacterial, anticatarrhal, expectorant neurotonic (powerfully stimulating)
Indications	Viral infections of all types: influenza, mononucleosis, herpes zoster, herpes, hepatitis et viral enteritis +++++ Serious immune efficiency [sic] +++

	Bronchitis, nasopharyngitis, sinusitis, cold ++++ Lymphatic drainage et water retention +++ Insomnia, depression, anxiety +++ Extreme nervous and physical fatigue ++++
Dosage	Internal use: 2 drops CTEO, 3 times per day, in synergy with Niaouli or Eucalyptus Radiata, in honey, olive oil or on a cube of sugar, under the tongue for all viral states and nervous disorders. External use: 5 drops CTEO, 3 times per day, en massage on both sides of the spine or on the chest, according to the conditions to be treated.
Precautions for use	Do not use during the first 3 months of pregnancy.

TEA TREE <i>Melaleuca alternifolia</i>	
Aromatic molecules	Terpinene-4.ol, gamma-terpinene
Properties	Powerfully antibacterial with a wide spectrum of action, antifungal, parasitocidal, antiviral and immunostimulant Radioprotective for the skin
Indications	Oral infection: aphthosis, stomatitis, abscess, gingivitis +++ Bacterial or viral infections of the upper and lower respiratory tracts : sinusitis, rhinitis, otitis, laryngitis, pharyngitis, bronchitis ++ Urinary and gynaecological infections +++ Ungual and subungual cutaneous mycosis +++ Lymph oedema ++ Varicose veins, heaviness in the legs, haemorrhoids ++ Prevention of skin burning by radiotherapy ++++ Parasitic infections affecting the skin (scabies, ringworm, etc.) or intestinal infections (lamblia, roundworm, etc.) +++
Dosage	For all conditions, external treatment is ideal. Very often, 3-4 drops of CTEO massaged onto the skin, repeated 3 times per day for 5-6 days, suffiront à eliminate the condition. External treatment may be supplemented with 3 drops taken orally, in honey, olive oil or on a sugar cube, under the tongue, for 5-7 days.
Precautions for use	Do not use during the first 3 months of pregnancy.

PEPPERMINT <i>Mentha x piperita</i>	
Aromatic molecules	Menthol, menthone
Properties	Anaesthetic, analgesic, antipruritic [anti-itching] Urinary et intestinal anti-inflammatory Antibacterial, antiviral Cholagogic [promotes flow of bile] et cholaretic, genral toner and stimulant: hypertensive, vasoconstrictive
Indications	Neuralgia, sciatica, arthritis, rheumatisms, tendinitis +++ otalgia, rhinitis, sinusitis, laryngitis, halitosis +++ Hypotension +++

	Hepatopancreatic fatigue +++ Physical or mental asthenia +++ Nausea, vomiting, dyspepsia, indigestion, flatulence +++ Herpes zoster, migraine, dizziness, neuritis ++++ Urticaria, eczema, acne, chicken pox +++ Shock, trauma ++++
Dosage	CTEO drops, 3-4 times per day in honey, olive oil or on a sugar cube, under the tongue, for digestive or urinary disorders. External treatment: 3-4 drops CTEO applied very locally, 3 times per day, for pour les pains of all sorts. Dilute for larger areas or repeated applications.
Precautions for use	Not to be administered to children less than 6 years old. Not to be taken during pregnancy or breastfeeding.

CHINESE CINNAMON <i>Cinnamomum cassia</i> !! Always dilute – risk of burning !!	
Aromatic molecules	E-cinnamaldehyde
Properties	Powerfully antibacterial with a wide spectrum of action, antiviral, immunostimulant , antifungal, parasitocidal, anti-parasite, antifermentary, uterine and emmenagogic tonic sexual and aphrodisiac tonic nervous and respiratory stimulant hyperemic anticoagulant, blood thinning
Indications	Gastrointestinal infections from diverse causes: diarrhoeas, amoebiasis, typhus, dysenteries ++++ Bronchitis, severe flu +++ Cystitis, urethritis, leucorrhoea (vaginitis) +++ Sexual impotence +++ Tropical infections +++ Exhaustion, depression ++ Acne, anthrax +++
Dosage	Internal use: Always dilute: 1 drop CTEO + 10 drops hazelnut (vegetable oil) 4 times per day for bacterial and parasitic infections External treatment: always dilute: 2 drops CTEO + 50 drops nut oil for tonic action
Precautions for use	Possible external use diluted 1 to 20% maximum CTEO in a hazelnut or sesame vegetable oil Not to be taken during pregnancy or breastfeeding. In pure state, frequent dermal irritation (dermocaustic (skin sensitive))

NIAOULI <i>Melaleuca quinquenervia CT cineole</i>	
Aromatic molecules	1,8 cinéole, viridiflorol
Properties	Selective antibacterial Antifungal Antimycobacterial Anticatarrhal, expectorant, balsamic Venous decongestant Skin radioprotective Antiviral Skin tonic, topical
Indications	Catarrhal, bacterial or viral respiratory infections: bronchitis, colds, sinusitis, pharyngitis +++ Herpes zoster, chicken pox, oral herpes ++++ Gynaecological infections: genital herpes, cervical dysplasia, Condyloma acuminata (genital warts), leucorrhoea +++ Varicose veins, venous stases, haemorrhoids +++ Prevention of radiation therapy burns +++ Sores, psoriasis, acne +++
Dosage	Internal use: 2 drops CTEO 3 times per day in honey, olive oil or on a sugar cube, under the tongue for respiratory infections External use: Rub affected area with 4 drops CTEO, 3 times per day for all the cited indications
Precautions for use	Do not use during the first 3 months of pregnancy.
SARO (MANDRAVASAROTRA) <i>Cinnamosma fragrans</i>	
Aromatic molecules	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Properties	Antiviral Antibacterial Antifungal, antiparasitic, anticatarrhal, expectorant Immunomodulating Antispasmodic, neurotonic, astringent skin tonic
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79 (...) respiratory tract viral and bacterial infections (...)
Dosage	Internal use: 2 drops CTEO in honey, olive oil or on a sugar cube under the tongue, 3 times per day for respiratory, urinary, oral and gynaecological infections External use: 3 drops CTEO on the forehead 3-4 times per day for problems of sinusitis and rhinitis, 8 drops on the chest 6 times per day in the event of flu or respiratory symptoms
Precautions for use	Do not use during the first 3 months of pregnancy.

<p style="text-align: center;">CLOVE <i>Eugenia caryophyllus (Syzygium aromaticum)</i> <i>! Always dilute: corrosive</i></p>	
Aromatic molecules	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Properties	Very powerful antibacterial with a wide spectrum of action: antifungal, parasitocidal, deworming, stomachic, carminative Antiviral and immunostimulant Uterine, nervous, sexual tonic Hypertensive Anaesthetizing and cauterizing [<i>pulp chamber ? – translation not found</i>]
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Dosage	Internal use: 2 drops CTEO 3 times per day in honey, olive oil or on a sugar cube under the tongue for all infections and to benefit from its tonic action. External use: 2 drops CTEO + 10 drops hazelnut vegetable oil, 3 times per day on the area relevant to the target organ to be treated.
Precautions for use	Internal use solely under the supervision of a therapist, External use possible by diluting up to maximum 20% in a hazelnut or sesame vegetable oil Not to be administered to children less than 6 years old. Not to be taken during pregnancy or breastfeeding. Not to be used over extended periods unless under the supervision of an aromatherapist.

<p style="text-align: center;">ROSEWOOD <i>Aniba rosaeodora</i></p>	
Aromatic molecules	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Properties	
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Dosage	
Precautions for use	

HO WOOD <i>Cinnamomum camphora</i> CT linalool	
Aromatic molecules	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Properties	Antiseptic Skin tonic and astringent Antibacterial Antifungal Antiviral Skin-firming
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Dosage	Internal use: 2 drops CTEO in honey, olive oil or on a sugar cube under the tongue, 3 times per day for respiratory infections (...) External use: 2 à 3 drops CTEO + 2 drops hazelnut vegetable oil applied locally (...)
Precautions for use	Do not use during the first 3 months of pregnancy.

NOBLE LAUREL <i>Laurus nobilis</i>	
Aromatic molecules	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Properties	
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Dosage	
Precautions for use	

EUCALYPTUS RADIATA <i>Eucalyptus radiata</i> ssp radiata	
Aromatic molecules	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Properties	
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Dosage	
Precautions for use	

IMMORTELLE <i>Helichrysum italicum ssp serotinum</i>	
Aromatic molecules	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Properties	
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Dosage	
Precautions for use	

LAVANDER ASPIC <i>Lavendula spica</i>	
Aromatic molecules	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Properties	
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Dosage	
Precautions for use	

CISTUS LADANIFER <i>Cistus ladaniferus CT pinene</i>	
Aromatic molecules	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Properties	Antiviral and immunoregulating astringent et haemostatic neurotonic et regulates the parasympathetic nervous system wound healing
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Dosage	Internal use: For nervous and immune conditions, 2 drops from 1 to 3 times per day, in honey, olive oil or on a sugar cube under the tongue External use: 2-3 drops twice per day locally above the organ to be treated
Precautions for use	Do not use during the first 3 months of pregnancy.

TARRAGON <i>Artemisia dracunculus</i> ! Dermocaustic (skin sensitive) – always dilute	
Aromatic molecules	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Properties	Antiviral Powerful antispasmodic Stomachic, carminative Antiallergic Anti-inflammatory Antifermentary, mental tonic
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Dosage	Internal use: 2-3 drops CTEO after each meal in a little olive oil, honey or on a sugar cube under the tongue External use: 5 drops CTEO + 5 drops hazelnut oil and massage over the painful area
Precautions for use	External use possible when diluted in a hazelnut or sesame vegetable oil. Do not use during the first 3 months of pregnancy. May cause skin irritation when used undiluted, in its pure state (dermocaustic).

WINTERGREEN Gaultheria procumbens ! Dermocaustic (skin sensitive) – always dilute ! NEVER to be taken during pregnancy: ABORTIVE	
Aromatic molecules	Methyl salicylate
Properties	Analgesic, regenerative/wound-healing Antispasmodic, antirheumatic Hepatocytic stimulant Antitussive Anti-inflammatory
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Dosage	Internal use: Never ingest. External use: 3 drops CTEO + 3 drops hazelnut oil (or with a dab of LLR G5 colloidal silica), 3 times per day
Precautions for use	Always dilute. Not to be administered to children less than 6 years old. Not to be taken during pregnancy or breastfeeding. May cause skin irritation when used undiluted, in its pure state (dermocaustic).

CHAMOMILE <i>Chamaemelum nobile</i>	
Aromatic molecules	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Properties	Anti-inflammatory Antipruritic [anti-itching], antiphlogistic, antiallergic Digestive tonic, carminative, cholagogic Sedative, pre-anaesthetic, calms central nervous system, Analgesic
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79 (...) insomnia, intestinal parasitosis, nervous asthma [<i>asthma precipitated by psychic stress</i>] (...)
Dosage	Internal use: 2 drops CTEO in honey, olive oil or on a sugar cube under the tongue, 3 times per day for nervous disorders or intestinal parasitosis External use: 2 drops CTEO + 2 drops hazelnut oil on the solar plexus or either side of the spine, twice per day for nervous disorders, or directly on the skin condition [<i>sic</i>]
Precautions for use	Do not use during the first 3 months of pregnancy.

SCOTS PINE <i>Pinus sylvestris</i>	
Aromatic molecules	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Properties	
Indications	See <i>Aromatherapie Scientifique Huiles Essentielles Chemotypees</i> (Scientific Aromatherapy: Chemotyped Essential Oils) by A. Zhiri, D. Baudoux, M.L. Breda ISBN 2-919905-2-79
Dosage	
Precautions for use	

- CTEOs IN MESSAGES:

Adults: every day, in the morning (and evening in the case of an epidemic) massage the chest, neck and between the shoulder blades with 5/6 drops of the mixture: CTEO Ravintsara 3ml / Eucalyptus Radiata 3ml / Niaouli 3ml / Clove 3ml calendula vegetable oil QS [*"QS" not found – connected with quality certification?*] one bottle 30ml

Children: CTEO = Rosewood 2ml / Niaouli 2ml / Eucalyptus Radiata 2ml / Lemon 2ml hazelnut vegetable oil QS [*"QS" not found – connected with quality certification?*] 30ml (1 fl)

CTEOs can be taken as a preventive measure, to prevent the virus from clinging to the trachea, for the duration of the epidemic, or as a curative measure, when the infection is declared.

A BALANCED DIET

- A balanced diet helps to stimulate immunity
- Rich in vitamins and minerals
- Vitamin D (fatty fish, dairy products) or dietary supplements
- Vitamin D3 2000 IU per day in winter and in influenza prevention.
- Natural vitamin C 1000 mg 1 per day (Sunday.fr)
- Magnesium actimag 1 tablet / day
- Children:
 - Vitamin C: for children under 3 years of age, the dose is a quarter of that for adults.
 - Children over 15 kg in weight may take half the adult dose during the entire period of the epidemic.
 - Magnesium: for children of 30 kg in weight: 100 mg x 2 times a day.

QUERCETIN

- **QUERCETIN** is a natural bronchodilator antiviral super nutrient, antioxidant, antihistamine, and anti-inflammatory, which reduces allergies and the risk of asthma, and prevents cardiovascular diseases (decrease in blood pressure).
- It is also antimutagenic (anti-cancer).
- Its effectiveness is proven as an antioxidant and anti-inflammatory, especially for allergic rhinitis, prostatitis.
- Allergies: from 100 mg to 200 mg, 3 times a day, 20 minutes before meals.
- Inflammation (prostatitis): from 200 mg to 400 mg, 3 times a day between meals.
- Improves the absorption of Vitamin C in the body and delays its elimination.
- Quercetin is a bitter flavonoid found in plants such as capers or lovage (mountain celery).
- **Reduces inflammation** and associated pain. Slows down the effects of age. Protects the brain and nervous system from neuro-degenerative diseases. Decreases hypertension.
- Reduces the aggregation of atheroma plaques in the arteries, responsible for infarcts, thrombosis and strokes.
- Strengthens immunity while **regulating the response of the immune system.**
- Powerful antihistamine, reduces allergic reactions such as eczema and hay fever, and decreases the severity of asthma attacks.

Precautions for use

- Daily doses should not exceed 1,200 mg.
- Do not take more than 500 mg in prolonged use (more than 2/3 months) without a therapist's recommendation: few data are available on long-term use. Does not produce negative effects when taken over a period of 3 months.
- **For pregnant women and children under 12 years of age, there are no known contraindications.** However, in the absence of exact pharmacological data, it is advisable not to consume more than 500 mg over a maximum period of up to 1 month.

- Do not take quercetin if you have a thyroid imbalance.
- A long-term and large intake can cause kidney problems.
- It is therefore not recommended to use it continuously.
- When administered at prescribed doses, quercetin does not cause any adverse effects.
- The most common side-effects of overdose are stomach and headache.
- This substance is prohibited in individuals with kidney problems.

Drug Interactions

- Quercetin may interact with the following treatments :
- anticoagulants, as it can exert an anticoagulant effect.
- Corticosteroids
- May interact with Cyclosporin (an anti-rejection drug used mostly for transplant patients).
- **Can inhibit the action of antibiotics of the quinolone family.** Do not take in case of chemotherapy, especially with Taxol.
- **Avoid in case of treatment with antibiotics of the family of fluoroquinolones.**
- Researcher Michel Chrétien in Canada (Clinical Research Institute of Montreal) indicates that quercetin may act on coronavirus, in a preventive and curative manner.

Montreal researchers propose a treatment for COVID-19

[Quercetin and Vitamin C: An Experimental, Synergistic Therapy for the Prevention and Treatment of SARS-CoV-2 Related Disease (COVID-19). Frontiers in Immunology. Vol 11. 2020. P. 1451. www.frontiersin.org/article/10.3389/fimmu.2020.01451]

HOMEOPATHY

Influenzinum 15 CH 10 gr 1st Wednesday

Yersin serum 15 cH 10 gr 3rd Wednesday

Thymusine D15 10 gr on the 2nd and 4th Wednesday

Morning and evening except Wednesday, 10 drops of: Ferrum phosphoricum D6 / ferrum sidereum D10 / prunus spinosa fructus D1 (a bottle of 60 ml Weleda)

Homeopathy should be taken throughout the period of the epidemic, as well as for other preventative treatments.

[Translator's note: These products may not be available in Anglophone countries. Readers should consult a qualified homeopath for equivalent products and appropriate dosages.]

PHYTOTHERAPY

Decoction of boxwood (available at pharmacies, organic shops, forests in Corsica, in the Hautes-Alpes and in Savoy, in hedges or ornamental garden beds): 40g of Centaurea (leaves and small stems) in a litre of water, boil until reduced by half, let it brew and drink lukewarm in three parts: provokes abundant sweating.[*]

Used by some alpine villagers to protect themselves from the "Spanish Flu" of 1918.

Described as spectacular. Pay attention to precautions for use:

<https://www.marqueverte.com/1390-buis-feuille-150-g-calmelia.html>

<https://www.nature-en-tete.fr/phytotherapie/buis/ingredient-177>

<https://www.botanical-online.com/en/medicinal-plants/acne-remedies>

[*Translator's note: The instructions for this decoction are not clear. Readers should seek advice from a qualified phytotherapist.]

[Pandey, Mukeshwar & Debnath, Mousumi & Gupta, Shobit & Chikara, Surendra. (2011). *Phytomedicine: An ancient approach turning into future potential source of therapeutics*. *Journal of Pharmacognosy and Phytotherapy*. 3. 27-37. [Download PDF](#)]

MAGNESIUM CHLORIDE

Available at pharmacies and organic shops, it is sold under the name "Sel de Nigari". One sachet in a litre of water.

Keep the day free. Drink divided into 4 doses over 1 hour. Stay close to the toilet.

Detoxes and strengthens the immune system. Do not eat until evening.

Not suitable for those with renal impairment. Doses for children should be adapted appropriately!!!

Information on use and precautions for use:

<http://www.nigari.fr/chlorure-de-magnesium/>

<https://draxe.com/nutrition/magnesium-chloride-benefits/>

ACTIVATED CHARCOAL

Available at pharmacies or in organic stores (effective against bloating): one spoon in a glass of water, 3 hours away from meals and other medicines.

Microporous so it traps the virus and evacuates it.

Research precautions for use.

[Top 10 Activated Charcoal Uses, Plus Potential Side Effects:
<https://draxe.com/nutrition/activated-charcoal-uses/>]

**Very hot drinks
Hot showers and baths
Saunas
Sunbathing**

PROPOLIS

Propolis (harvested from beehives) is not only anti-bacterial and anti-viral but also anti-inflammatory.

It is used for immune weaknesses.

It is particularly interesting in this case.

WATCH OUT FOR ANXIETY

Anxiety (chronic fear) weakens your immune system.

Stay away from anxiety-provoking "News" with constant repetition of death tallies, and live in the present moment, in joy, with your loved ones.

It bears repeating that being happy is good for our health. Stress is pathogenic.

MEDITATION

Meditation decreases anxiety, raises your vibratory rate and strengthens the immune system.

- Sit in half-lotus position on a cushion (*zafu*) [or on a chair if more comfortable], knees in contact with the floor, back straight if possible, and stretch the spine as if pushing the sky with the head and the floor with the knees.
- Keep the eyes half-closed, seeing everything.
- Keep the back upright, but relax the rest of the body, especially the shoulders.
- Put your hands together, the left hand in the right, with the edge of the hands against the lower abdomen and the thumbs gently touching each other, "neither mountain nor valley".
- Come back to the body and the present moment, focusing on your breathing.
- Exhale completely.

Let your breathing happen automatically, naturally, without thinking about it.

- Let the thoughts that arise naturally pass by, without challenging them, without holding anything back, without thinking about "I", without generating thoughts.
- Remain in stillness.
- Just be.
- Let go. Leave beliefs and thoughts behind. Just sit, with no aim in mind, without focusing on any reason for sitting. Sit without purpose.

Stretch the back and release the shoulders.

Focus on the posture, on breathing, and let thoughts pass by, holding a slight inner

<p>smile.</p> <ul style="list-style-type: none"> • From moment to moment always fresh, always available to a new present moment. • Let thoughts drift by: "The vast sky is not disturbed by the flight of white clouds".
<p>There are many tutorials on the Internet explaining Zen meditation, which was practised by samurai. The samurai who practised Zen meditation were renowned for their power.</p> <p>Meditation brings balance, relaxation, provides peaceful strength and restores you to an inner peace that enables clearer perception. This can make our actions much more effective.</p> <ul style="list-style-type: none"> • www.youtube.com/watch?v=s4vm_6Hs4vE • www.youtube.com/watch?v=9h4GibIYrPk • www.youtube.com/watch?v=dDJ_wbjBL6c • www.youtube.com/watch?v=KQOAVZew5i8
<p>Testimony of a Hindu who contracted cholera and who explains that all Hindus would test positive for tuberculosis, but that they have simply learned to live with it, to harmonize and not show the symptoms. The bacterium is present but it is not pathogenic:</p> <p>Corona doesn't want to kill you - Sadhguru answers critics: www.youtube.com/watch?v=sz_FOPYFJyQ</p>
<p>Raising your vibration can place you beyond the fear of the virus.</p>
<p>The work of Professor Masaru EMOTO demonstrated the influence of emotions and thoughts on the state of matter (water structure): www.youtube.com/watch?v=SOdKA70KkB8</p> <p>The highest vibration is gratitude. Staying in a state of gratitude for life is the highest of protections.</p>

Following the decision of the President of the Republic *[of France]* to extend the lockdown until 11 May 2020, I ask you to please continue your efforts.

Lockdown is an opportunity:

- For your children to get to know and spend time with their parents.
- To learn to say thank you – even in a whisper or even in our thoughts – to the people providing care to you or to one of your loved ones.
- To stay quiet and listen to the intensity of silence. You will see how good it feels to discover the beauty of the music of life.
- To see grandparents again, so dear to your little ones.
- To remember the delicious smell of those dishes that your mother – now in intensive care – used to make, the fragrance of lily of the valley in spring, and sitting in the garden of your favourite country pub savouring a pint of real ale. With a little practice you will discover how to do this.
- To observe nature renewing itself in this spring of 2020 and to look forward to the same rebirth in 2021.
- To love and love again, but better.
- To fear for one's loved ones, and to tell yourself that you at least will not put them in danger.
- To think of your own death, to remember your loved ones who have passed on before you and to remember their presence at your side, and to restore them to their place beside you.
- To understand the invisible bond that was so lovingly forged by our mothers and grandmothers to help us recreate that sort of reassuring protection around us, that family nest, which shields and sometimes stifles us a bit.

- To look forward to freedom from quarantine and any further quarantine, and above all, to look forward to you and yours being present at the dawn of a new era for humanity.
- To learn the meaning of important words such as solidarity, caring, empathy, humility and humanity; they will be useful to you for your coming new life.

PHYCOCYANIN

A therapeutic gem

Phycocyanin is the noblest element of spirulina and klamath. It is a blue pigment that captures (solar) light energy, which is then transformed into biochemical energy in our cell factory. It is this ability to capture light photons that explains the remarkable qualities of Phycocyanin. **Condensed solar energy.**

The sun's rays reaching our planet turn into heat and light. The retained portion of this energy falls on living chlorophyll surfaces (leaves of trees, plants, grasses, etc.). This small portion of energy is then used to build organic substances that can feed plants, bacteria, animals and man.

So we see the paramount importance of the phenomenon of photosynthesis. It helps us understand what the presence of plant chlorophyll brings to man: the energy of the sun.

Spirulina has this particular feature: in addition to the chlorophyll it has in abundance, it makes phycocyanin, a unique protein complex that absorbs a very large part of the solar light spectrum, something other plants cannot do.

Phycocyanin "captures" photons and turns them into energy. It is the source of life.

- Phycocyanin was administered to 270 Chernobyl children whose bone marrow had been damaged by radiation and enabled them to recover within six weeks, even though their bodies could no longer produce red blood cells. Phycocyanin normalizes the number of white blood cells and prevents the development of leukaemia.

An optimized immune system

- Phycocyanin as an immunomodulator energizes the functions of the thymus (the latter plays an important role in cellular immunity). Phycocyanin activates the stem cells of bone marrow that are responsible for the production of all white blood cells. It strengthens the mucosal immune system – we find mucous membranes within the digestive tract; the respiratory, urinary and genital systems; as well as in the eye. It also plays a part in resistance to stress.

A potent antiviral

- In 1996, the Faculty of Medicine at Harvard University and the Dana-Farber Cancer Institute were able to demonstrate that phycocyanin can inhibit the replication of HIV (AIDS virus) in T-lymphocytes and peripheral mononuclear blood cells at a concentration of 5 to 10 microns per ml. At higher doses, it stopped viral replication.
- Other studies demonstrate the ability of phycocyanin and associated spirulina elements to inhibit other viruses such as influenza, mumps, measles, herpes simplex and cytomegalovirus.
- Phycocyanin protects the cell by preventing the penetration of the virus through the membrane. The virus then cannot multiply and is then eliminated.

Cancer

- A study conducted by Professor Madhawa Raj, a researcher at the Louisiana State University Health Sciences Center New Orleans, found that a cocktail of six natural compounds of vegetables, fruits, spices and roots eradicated 100% of breast cancer cells in a sample of patients without toxic side effects on healthy cells:
 - **Curcumin**, the active ingredient of turmeric.
 - Soy isoflavones.

- Indole-3-Carbinol from cruciferous plants (such as broccoli).
- **Phycocyanin** from spirulina.
- Resveratrol from grapes (the active ingredient of a good French wine).
- **Quercetin**, a flavonoid found in fruits, vegetables and tea.

The most powerful antioxidant ever known

Free radicals cause chain reactions that damage the phospholipids in the membranes of all our cells. The consequence is aging and degenerative diseases. In order to counter this phenomenon, our body itself produces powerful antioxidants such as superoxide dismutase (SOD) catalase and glutathione peroxidase.

Antioxidants are found in a natural diet. Among the best known are beta-carotene and vitamins C and E.

Additional studies show that phycocyanin has an antioxidant activity 70 times greater than SOD and 20 times more efficient than vitamins C and E.

Important liver protection

Phycocyanin is detoxifying and protects the liver. It reduces the hepatotoxicity generated by chemotherapies and, in fact, any chemical.

Indications: liver disease, chronic heavy metal poisoning, chemotherapy, hypercholesterolemia....

Why phycocyanin is so valuable

This active ingredient fully promotes the production of stem cells and thus promotes the production of white and red blood cells, and platelets. It significantly improves immunity and blood count. Phycocyanin treats leukaemia and radioactivity damage. It inhibits the breakdown of the DNA strand.

As mentioned above, it can be said that phycocyanin is perhaps the most powerful antioxidant known to date and also an anti-free radical, even at low doses.

As a powerful detoxifying agent of the liver and kidneys, phycocyanin promotes the synthesis of bile salts and faecal evacuation of cholesterol. In addition, it plays a preventative and curative role on atherosclerotic plaque, which is responsible for a third of deaths in Europe.

It always acts in cases of physical fatigue (production of erythropoietin (EPO), but not that taken by doped runners) and mental fatigue (because of antioxidant factors). It detoxifies the body and also calms hyperactive children.

Phycocyanin is also a fabulous anti-inflammatory and behaves as a powerful cellular oxygenator. In photosynthesis, this substance captures all the wavelengths of the photons of the sun.

Phycocyanin is one of those substances that, at the centre of the cyanobacteria (spirulina or klamath), were responsible for the presence of oxygen in the atmosphere.

It has unique cell-regeneration power and counteracts the development of cancer.

For optimal effect: the French manufacturer Raimond Reymondier offers phycocyanin extracted from fresh spirulina. A team of French researchers offer a highly concentrated phycocyanin (3g per litre) in "native" form and it is in this form that shows therapeutic results a hundred times higher than those found in other forms.

CHRISTOCYANIN (JADE RECHERCHE)

- Comes in boxes of 21 ampoules.
- Christocyanin – Phycocyanin is a dietary supplement based on spirulina and is highly concentrated in phycocyanin (20.5 mg).
- It strengthens the body's natural defences and resistance.
- In addition to Phycocyanin, the extract contains part of the water-soluble fraction of spirulina: proteins, amino acids, enzymes, sugars, water-soluble vitamins and mineral salts.

SPIRULINA

Spirulina is a nutrient-dense, freshwater algae. It grows naturally in the warm waters of lakes in India, Chad and Mexico.

- We do not consume spirulina as is but dried. You will find spirulina available commercially in the form of powder to be added to the diet (in beverages or foods), capsules or tablets. You should pay attention to what you buy as there are very large disparities in quality. Some products are not really spirulina in its pure form. In addition, spirulina accumulates heavy metals when the culture medium is polluted. So pay attention to the geographical origin of spirulina.
- Spirulina is extremely rich in beta-carotene, iron, vitamin B12, vitamin E (powerful antioxidant), proteins, minerals and trace elements (calcium, phosphorus, magnesium, zinc and copper). It also contains chlorophyll and phycocyanin, a pigment with antioxidant properties.
- It is possible that spirulina is immunostimulating but this has not been demonstrated in humans. So far, only animal trials have shown an effect of spirulina on the immune system. The same applies to its antiviral, anti-allergic, anti-inflammatory, anti-neurodegenerative and anti-cancer properties. It is known that spirulina contains a lot of antioxidants that fight free radicals.
- Spirulina is rich in protein, with all the essential amino acids, but there are factors limiting their assimilation – some amino acids are present in small quantities. To potentiate the assimilation of spirulina proteins, it should be combined with cereals : rice, millet, etc. However, it is necessary to balance this protein intake: if we compare the protein intake of 5 g of spirulina to the need for 60 g of protein of a 60-kg woman, we see that it remains marginal.
- What is interesting with spirulina is that it is a natural product. It is therefore possible that the vitamins and minerals contained in it have a better availability than chemical dietary supplements. Its incredible wealth of beta-carotene is interesting for those who lack vitamin A. And since beta-carotene is a precursor of vitamin A, it will turn into vitamin A according to the needs of the body without the risk of overdose as with vitamin A supplements. Its wealth of iron and vitamin B12 could make it a good ally for the athlete or the anaemic or tired person.

Who should not take spirulina?

- Pregnant and breastfeeding women should consult their doctor for advice. People suffering from gout should not consume it. Spirulina is also not recommended for those who suffer from phenylketonuria.

Note: spirulina can have adverse effects, especially nausea, which is why it is advised to those who want to consume it to increase the amounts ingested gradually.

Warning: when starting a course of spirulina, it is advisable to start gradually.

- In practice, this means taking 1 gram per day for a week, then increasing the daily dose by 1 gram each week until generally reaching 3 grams per day (daily amount commonly recommended and sufficient for most consumers).
- The ideal quantity varies according to each individual, his or her goals,

metabolism, lifestyle and diet.

- It is important to listen to your body so as to better define your own optimal dosage with the help of a therapist. It is also recommended to consume spirulina during the day (morning/noon) before or during meals preferably, in order to make the most of its stimulating effect.

Daily DOSE that could be RECOMMENDED for an adult:

- Healthy person: 1.5 g to 2.5 g /day
- Unfit 40-year-old: 2.5 g to 3 g /day
- To treat temporary tiredness: 3 g /day
- To combat exhaustion or weakness: 3.5 g /day
- When ill: 4 g / day
- During convalescence: 4 g /day
- People doing sport: 4 g to 10 g /day.

ORGANIC SILICON LLR G5 *Dr Loïc Ribault*

Anti-cancer, anti-inflammatory and cell-regenerating.

In gel dilution, potentiates the action of essential oils.

In its liquid form, can be taken orally, decreases the toxicity of aluminium on the nervous system (heavy metal spread by chemtrails and present in vaccines)

Silicon is a trace element found in the body and in certain foods of plant origin. Although it is not one of the so-called essential trace elements, it is an important element for the immune system and for maintaining good bone health.

- It is an important trace element for the body
- It is found in mineral water and in foods of plant origin
- Fixes calcium, combats bone demineralization and is used to relieve various disorders, mainly of the bones, joints and skin
- It plays a role in the fixation of calcium; in particular silicon is found in the osteoid border where the bone is formed
- There is a high concentration of silicon in the thymus, an essential organ of the immune system. It also plays a role in the manufacture of antibodies. In addition to a balanced diet, silicon has a positive effect on people with osteoarthritis.

Foods naturally rich in silicon:

- | | | |
|---------------|-----------------|-------------------|
| • Almonds | • Hazelnuts | • Parsley |
| • Apples | • Lentils | • Spelt |
| • Bananas | • Lettuce | • Wheat bran |
| • Barley | • Mineral water | • White beans |
| • Dates | • Mushrooms | • Whole wheat |
| • Garlic | • Oats | • Wholemeal bread |
| • Green beans | • Onions | |

Organic silicon LLR G5

Silicon G5 is the form of organic silicon best assimilated by the body. It minimizes the

risk of crystallization in the kidneys since it is the form naturally present in the tissues: bones, skin, hair, tendons, etc.

Food supplements based on organic silicon are often found in the form of gel, capsules or oral solution. They are usually recommended for use in people with bone and joint diseases (osteoarthritis, arthritis, osteoporosis, etc.). They are also advised in some elderly people to prevent bone demineralization. Before taking silicon, ask your doctor for advice. There are certain contraindications to the use of organic silicon.

Side effects in case of excess silicon

Excess silicon is eliminated directly by the kidneys. It does not pose a risk to the body except in cases of renal failure.

Interaction of silicon with aluminium

Silicon reduces the assimilation and accumulation of aluminium. It could thus contribute to the prevention of certain neurodegenerative diseases by reducing the toxicity of aluminum on the cells of the nervous system.

The heavy metals aluminium and barium have been identified after analysis in the spraying of aerial chemical applications that have affected populations for years (chemtrails), particularly in the Var region of France (ANALITIKA laboratory). These are endocrine disruptors, which weaken the immune system and cause neurological diseases.

STRENGTHENING IMMUNITY

- Consume 2 grams of quality vitamin C daily. One possibility is [Dr. Mercola Liposomal Vitamin C](#)
- Consume ginger infusions (e.g. black tea with piece of fresh ginger covered with boiling water), thyme, stinging nettle
- Consume one clove of raw garlic every morning
- Fast for 2 days and drink only liquids such as water, or squeezed orange and lemon (Note: no juice with sugar added to the fruit)
- It is important to hydrate well (drink water)
- Take drops of essential oils
- Sleep well: it is during your sleep that your body builds its immune defences.

FIGHT INFLAMMATION BY EATING WELL

What do cardiovascular disease, asthma, Alzheimer's disease, irritable bowel syndrome, Covid-19, cancers and autoimmune diseases have in common?

Answer: **inflammation** – all new diseases are no longer infectious diseases, as in the nineteenth century, but are becoming about the inevitable degradation of cellular tissues.

- **Dr. Catherine Kousmine** sees the importance of inflammation related to the intake of bad fatty acids and thus an abnormal production of pro-inflammatory molecules (**cytokines** and prostaglandins PGE2) as a result of **over-consumption of denatured fats, meats and dairy products**. She named the molecules thus generated "war prostaglandins" as opposed to "peace

prostaglandins" (PGE1 and PGE3), generated by intake of oils such as borage, evening primrose or fish.

- Before the mechanisms of action of prostaglandins and leukotrienes, cellular messengers that regulate **immune and inflammatory processes**, were known, no one would have suspected that **fish and borage oils could help relieve diseases such as arthritis and asthma**. So how can one explain the exceptional anti-inflammatory activity obtained by the regular intake of a product like **Lyprinol**, if not by the presence of really effective fatty acids?
- A multitude of foods such as fish and borage oils can also act on war prostaglandins and curb their actions through leukotrienes, which are rapidly destructive and ignite tissues.
- If meat and denatured oils are on the menu, there is a risk of stimulating the production of the bad arachidonic acid, which invariably leads to a series of chain reactions leading to the formation of leukotrienes, which are all pro-inflammatory.

So what should we eat?

- The discovery of a measurable marker of inflammation in the blood, C-reactive protein, made it possible to make direct links between the intake of certain nutrients, including **omega-3, turmeric, ginger, blackcurrant**, and especially **klamath** and the rate of inflammation. Subsequently, several authors have proposed diets with anti-inflammatory potential, including [Dr. Andrew Weil](#), who is one of the biggest promoters of this diet and, more recently, Dr. Serfaty-Lacroix.
- The **anti-inflammatory diet** puts the emphasis on vegetables such as **whole grains, pulses and cold pressed virgin oils**, with an emphasis on linseed, rapeseed, walnut, borage, evening primrose and possibly all oils from cold sea fish.
- Significantly reduce the consumption of meat, which should not exceed more than 10% of the plate.
- Prefer fatty fish, but not too much.
- Soy derivatives are welcome: tofu, miso, tempeh, all generators of excellent vegetable proteins.
- And don't forget the excellent balance provided by the combination of cereals + legumes, guaranteeing a good coverage of amino acids.

- Several thousand phytonutrients have been discovered in the plant world and several hundred are found in edible plants. They are called polyphenols. Some of them, such as **quercetin** (the food that contains the most is the onion), are found in all vegetables: fruits, vegetables, cereals, pulses, tea and others. Others are more specific to certain fruits and vegetables, including, for example, anthocyanins, which are found mainly in small coloured fruits (blueberries, blackcurrants and others), as well as indoles in cabbage varieties.
- The antioxidant activity of phytonutrients against free radicals (to which we are increasingly exposed) is now recognized. But, their biological effects, although still poorly understood, go beyond this antioxidant effect.
- These phytonutrients have, among other things, the ability to reduce inflammatory reactions. This is what the anti-inflammatory diet aims at, recommending a very wide variety of fruits and vegetables and, more specifically, small fruits, oranges, tomatoes, leafy greens (and even soy), tea, red wine and dark chocolate.
- In the anti-inflammatory diet, sunflower, corn and safflower oil are never used,

but **olive oil is fine.**

- But **refined and "junk food" must be avoided.**
- These refined foods, such as white bread, pastries, white rice, and other types of junk food generally have a high glycemic index. They cause a dramatic increase in blood glucose (hyperglycemia). Hyperglycemia is related to inflammation.
- In the anti-inflammatory diet, it is recommended to consume **foods with a low glycemic index**, as they cause less inflammation. **Whole grain cereal products (rice, millet, buckwheat, quinoa)** usually have a relatively low glycemic index, as do al dente cooked pasta and pulses.
- **Here is an [overview of the glycemic index of some foods](#).** It is recommended to emphasize foods with a **glycemic index of less than 50**. Montignac bread is remarkable for this.
- Vegetables rich in solanine such as eggplants, potatoes, peppers and even tomatoes are not recommended at all.
- The same applies to foods that are sources of allergy, such as sometimes wheat, dairy products, peanuts, beef and pork. So make sure you have a multitude of "ancient" plants such as purslane, rutabaga, Jerusalem artichokes and many "wild" plants such as dandelion on your plate.
- And it must be stressed that sugar is a dangerous trouble-maker. We invite you to read or reread this article on sugar, by Dr. Andrew Weil: "[Heart Disease: Is Sugar A Killer?](#)"
- All foods with a high glycemic index promote inflammation. Animal proteins, sugar and its derivatives produce pro-inflammatory compounds that accelerate tissue aging. In a study published in 2006, it is explained that a pro-inflammatory diet (including many refined starches, sugars, saturated and trans fats and few antioxidants and omega-3) could cause excessive activation of the innate immune system.

SCHUMANN RESONANCE VORTEX JADE RECHERCHE

"Schumann Resonance and Vortex"

NB. The use of SRV increases the vibratory rate by about 200,000 Bovis units

Given its price, the Schumann Resonance Vortex device is intended for professional use. It is a device in the form of a plate on which it is possible to either stand, lie on your back or stomach, or sit. Sessions last between 5 and 10 minutes, repeatable.

The SRV combines two complementary modes of action:

- Schumann Resonance

- A vortex that is transmitted to your whole organism.

The Earth is covered with a layer of ionized air 60-640 km thick, called the ionosphere. This mantle protects the Earth from cosmic rays and solar winds. The Earth (negatively charged) and its ionosphere (positively charged) form a veritable capacitor. A difference in potential between the two is created. In 1957, the German physicist Winfried Otto Schumann calculated the frequencies of the Earth/ionosphere resonance. He determined the main permanent wave to be around 7.83 Hertz (cycles per second).

In addition to this fundamental frequency, there are also some harmonics of extremely low frequencies. These waves are called "Schumann Resonance" (SR); they are stuck between the surface of the ground and the cavity of the air comprising the ionosphere and are continuously vibrating around the 7.83 Hz frequency. This "pulse", this pulsation is constantly reactivated and feeds on the electrical activity of thunderstorms

all around the globe. There are about 300 lightning flashes per second. This "pulse" also feeds on the solar winds that excite the upper atmosphere.

When Schumann published these results, Dr. Ankermuller immediately saw the connection between this resonance and the rhythm of brain waves. Alpha waves (between 7 and 13 Hz) that pulsate throughout the cerebral cortex are in the frequency window of the Schumann Resonance. They are active in the dream state and light meditation. This is also the time when you feel the most creative.

Haim Worth and other researchers claim that the Schumann Resonance has had an influence on the development of our brainwaves, which seems logical since we inhabit this planet and are traversed by this resonance.

The frequency of 7.8 Hz is the frequency of our hypothalamus. It is a biological constant that humans need. When astronauts returned from their missions, they had serious health problems. The space ships have now been equipped with Schumann wave generators.

An [experiment involving putting volunteers in an underground bunker](#), totally isolated from electromagnetic fields, has been attempted many times. The results are always the same: uncoordinated heart rate, disturbed circadian rhythm, headaches, insomnia, emotional stress, confusion, depression, memory loss, pain, immune dysfunction, nausea, hormonal disruptions, etc. The symptoms disappear as soon as the volunteers exit the bunker.

In fact, the Schumann Resonance is the natural tuning fork of our alpha waves.

Apart from this experiment, let us note that subjects suffering from sleep disorders and fibromyalgia have a higher than normal level of magnetite in the inner ear.

1. Schumann Resonance (SR)

The Schumann Resonance regulates our internal clocks.

The frequencies of modern devices negatively interfere with our body. We are the first generation to live in an environment saturated with electrosmog. By reproducing the natural rhythm of the Earth, we can be ourselves.

The vortex generated by the SRV device is sinusoidal and rotates to the right. It is a soft vibration like a light tremor. When standing, it is important to bend the knees so that the tremor spreads to the rest of the body. By lifting the head slightly, the brain will benefit from this vibration.

Animals get rid of extreme stress by shaking. This tremor, as well as the vortex which is an amplification of it (combined with the Schumann Resonance) allows the deep muscle fibres to relax, to release tension. This prevents nerve compression.

(a) Back pain, muscle tension and herniated disc

For the back to be in good condition, the most important muscles are not necessarily the largest (those visible from the outside), but especially those that are deep and in direct contact with the spine. They are at one with it, move the vertebrae and guarantee stability. Their movements are delicate and less easily reached by manipulation. Tension in these deep muscles promotes degeneration. The spaces of the intervertebral discs undergo pressure and lessen, eventually causing wear. This leads to possible calcifications (vertebral osteoarthritis, facet joint syndrome). Then the surface of the vertebrae becomes rough and irregular, with the narrower spinal canal eventually damaging the spinal cord and the root of the spinal nerves.

The nerve roots are compressed and therefore irritated at the orifices located between the vertebrae (foramina intervertebral). According to a 1978 study by Dr. SUH, a physicist at the University of Colorado, stressed nerves transmit incomplete information and release toxic substances. The SRV can relax the deep muscle fibres through the action of the vortex.

The human body has 640 muscles, of which 150 muscles act directly on the spine. Thus there is no more nerve compression. The central nervous system (brains,

cerebellum, brainstem, spinal cord) can then transmit its orders to each cell without hindrance and pain via the spinal nerves. **Organ problems commonly disappear after treatment, by simply restoring this information.**

Using the SRV device enables stimulation of the blood and nutrient supply through this decompression. It becomes possible for intervertebral discs and muscles to regenerate. It may be beneficially used both in the morning and in the evening, at the end of the day when stress and contractions accumulate. More than 30% of the adult population suffers from back pain, and everyone in his or her life has suffered from it at least once. These back pains are not only unusual muscle stresses, they are also the result of stress and worries. So back pain should be considered a warning.

2 The vortex

(b) Sport, osteoarthritis, arthritis, rheumatism and osteoporosis.

To remain effective, people need to move. We were not designed to spend our time sitting behind a desk. It is obvious that exercise keeps us in shape. All studies will tell you that inactivity kills more than cigarettes. This is through lack of assimilation, by acidosis. The SRV device is sport for the lazy. Regular use over the long term promotes good muscle maintenance and tone.

It also promotes the disappearance of connective tissue adhesions and an increase in endurance. The SRV device improves coordination.

It maintains tendon and ligament flexibility. Cartilage devoid of blood vessel feeds from synovial fluid by imbibition. The vortex promotes the penetration of nutrients into the cartilage. It is obvious that lack of movement deprives it of this natural pump.

Concerning bones, the activity generated by the vortex induces the formation of bone tissue. This acts at the same time on bone mass, density and texture. It is useful to combine vitamin D and organic silicon in this precise case. The SRV will be very useful in preventing falls and fractures, improving balance, walking safety and optimal ground contact, and balancing irregular body loads.

(c) Lymphatic system

The lymphatic system is a network that passes throughout the body. It includes many vessels distributed throughout the body and passing through nodes. For the layman, think of the underground train network with its stations. Some organs such as the spleen, thymus or bone marrow are associated with the lymphatic system.

In this network, it is the lymph that carries the toxins and the hormonal surplus and then sends them to the lymph nodes to be destroyed. Thus the lymphatic system drains the surplus while detoxifying. It also contributes to the circulation of nutrients and white blood cells. In fact, the lymphatic system is involved in the process of activation of the specific immune response. By nourishing the tissues, it nourishes the skin and thus has a positive action on healing. The lymphatic system does not have a pump, unlike the blood system, which has the heart. Lymph circulation results mainly from body movement and muscle contraction. For example, 100 ml of lymph per hour passes through the thoracic duct of a person resting. During one exercise, 20 to 30 times more flows.

We find the same proportion between a sedentary person and a resting person who has done some physical activity. For all these reasons the SRV, thanks to its vortex, regulates the lymphatic system, and improves elimination of organic body waste, and indirectly makes better skin. If, for example, you have acne, it is because the body is having trouble eliminating its waste products. It also prevents lymphatic oedema, thus avoiding swelling of soft tissues.

(d) Cellulite

The causes of cellulite are many: poor blood and lymph circulation, dietary error, stress and hormonal disorders. The SRV will act on most of these causes. It cannot do anything about dietary errors, but will act on other factors. It will eventually promote muscle at the expense of fat. The body stores more fat in areas where muscles work little. In these areas, the fat cells increase more easily and then strongly compress the blood and lymph vessels, thus leading to a gradual asphyxia of the tissues.

(e) Stress, insomnia and headaches

In addition to the effect of the Schumann Resonance on stress and insomnia, the vortex provides improved oxygenation of the body, promoting relaxation. A session after a strenuous day allows you to recharge your batteries and get a better night's sleep. Headaches also disappear due to better oxygenation of the brain. For stressed people, the SRV is equivalent to a relaxation session. When someone comes off the plate, he or she is completely relaxed.

(f) Digestion

On the SRV, when you are lying on your stomach, you stretch your abdominals: this allows the proper maintenance of the digestive organs and promotes the evacuation of the stool. By tensing the intestinal muscles, the assimilation of nutrients is promoted. It is a sedentary lifestyle that most often causes constipation. The propagation of the vortex to your body will stimulate or regulate transit. Difficult digestion will also benefit from the SRV.

(g) Hormonal disturbances

We have seen earlier that the lymphatic system drains the hormonal surplus, among other things, to be destroyed in the lymph nodes. Thus, by stimulating lymph, hormones will tend to become regular. Here is an anecdote that explains clearly: a woman whose hair you might have thought dirty but which was in fact greasy (it was a hormonal problem) had two sessions on the SRV; the next day her hair looked clean without having been washed – it was no longer greasy. To conclude with the SRV, in addition to the fact that pains disappear quickly, the SRV frees everyone from the muscle tension trapped in the body that comes from stress and which goes on to create diseases. The use of the SRV relaxes the body and enables users to "let go". It strengthens the immune system.

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COLLOIDAL SILVER

Colloidal silver (solute of silver particles) is effective in eliminating more than 600 species of bacteria, **viruses** and microbes. It heals the most minor wounds up to more complex problems such as ulcers, **heart problems** or malaria. Thanks to its **tissue-regenerating property** which has been discovered, this miraculous solution could even cure some cancers. Colloidal silver has no side effects, but should be used in accordance with the dosage in order to complete the treatment in the best conditions. Insufficient and excessive dosage may make it less effective or unresponsive to viruses, bacteria, microbes and fungi.

Oral intake of colloidal silver

This is the most common method of using colloidal silver. It is recommended for the treatment of **pneumonia and various infections**. Dosage varies according to body weight.

Of course, the dosage should be reduced by half for children compared to that for an adult.

For prevention, 10-15 ml of solution taken 3 times a day is usually enough.

As a remedy, this dose should be multiplied by 3 (i.e., 30 ml, 3 times a day).

Taking this product for two weeks **strengthens the immune system**.

For best results and for the solution to act quickly, colloidal silver should be kept in the mouth under the tongue.

Oral colloidal silver is used both as a preventive and curative method.

Local application of colloidal silver

In local application it can be used as a spray, by use of a dropper or on a dressing (impregnated gauze), as a powerful disinfectant and bactericidal for an infinite number of ailments: shingles, burns, warts, chickenpox, scabies, conjunctivitis, allergies, mycosis, scalp care, acne, etc.

Silver particles act very quickly, deactivating bacteria on contact with them.

The spray method can be used against sinusitis, wounds, burns, external infections and more, using 1 to 3 sprays about 3 or 4 times a day. People suffering from conjunctivitis, eye irritation, otitis and other ailments resort to 1-3 drops per application at a frequency of 2-3 times a day.

Colloidal silver by inhalation

The inhalation technique of this product can treat certain infections such as respiratory tract infections and sinusitis, as well as combat toothache, aphthae, angina, tonsillitis and even chronic bad breath.

Using a nebulizer, the treatment consists of a 5-minute session three times a day.

11. HOW TO MAKE A HOME-MADE MASK

The sale of masks – although available – is prohibited to pharmacists, and laboratories – which have the capacity – are prohibited from performing screening tests.

A mask without a filter is intended to intercept water drops suspended in the air. It should not be reused as is (the virus remains on its surface for some time). Exposing it to the sun can eliminate the virus and allow the mask to be reused.

Video: [How to make your own face covering](#)

A mask with activated charcoal cartridges will obviously trap the virus in the cartridges, which must be changed regularly. It also protects eye access, but can rarely be worn

over long periods. Given the times we are living in, with facial recognition and drones and intrusive technologies proliferating, being forced to wear a mask paradoxically has its advantages (every cloud has a silver lining). Essential oils or activated charcoal are useful additions to a home-made air filtration device.

12. EXPLOSIVE ALTERNATIVE INFORMATION

Another point of view ...

THE SURPRISING APPROACH OF DR. TALL SCHALLER

Counterbalance to a corrupt and criminal organization

Having reached this stage of our investigations, we thought we had thoroughly covered the issue.

However, as startling as they are, the statements of Dr. Christian tall SCHALLER, who – it has to be said – seems credible, have drawn our attention.

Dr. Tall Schaller is a proponent of holistic medicine and opposed to vaccination, which he has denounced as having indisputably morbid components under the generic term "adjuvants", such as aluminium and mercury (as well as human foetal shreds). He advocates – like many homeopathic doctors – the practice of fasting to detoxify the body and thus defeat disease.

He considers that our current conception of disease is as archaic as the very learned mediaeval assertions of the Sorbonne that the human body contained 35 litres of blood according to the conception of the time, or that the Earth was flat.

In the case of Covid, he opposes Pasteur's theory that microorganisms are the cause of diseases. He is not alone in saying this: all homeopaths will tell you the same.

According to Dr. Schaller, disease arises from an imbalance related to the "terrain" and not from an external agent, as microorganisms (such as bacteria and viruses) are present everywhere but become pathogenic only under certain conditions.

He states that viruses are not living beings, but rather units of information, going from cell to cell to launch an alert, a kind of distress signal related to an imbalance or a threat.

So we would be making a mistake about the enemy by shooting the messenger.

If we look rather to the influence of 5G-type radiation, which visibly and exponentially increases the pathogenic potential of the virus, the bad news that provokes a warning and an inadequate widespread response may well be the exposure of the human body to electromagnetic waves deemed highly toxic, or to industrial or other pollution. Some have noted that aerial applications (**chemtrails**, as opposed to contrails, which are the result of normal aerial activity) have ceased during the lockdown. Nevertheless, these sprayings, the impacts of which have been analysed, lasted for a long time and concealed in particular **heavy metals (aluminium, barium – which are essentially endocrine disruptors) and nanoparticles**.

*
* *

Whatever may be the problem, the virus in question has been presented to us as an

artificial construction.

In that case – since there is treason in the air – it was designed to deliver a "false message" to the immune system, provoking the noxious reaction of the body.

Given this situation, since Prevotella seems to be implicated, it might still be wise to stop the action of this bacterium (which seems to serve as a relay and shelter to the virus, and be the source of the potentially fatal cytokine shock), to administer an anti-inflammatory, two antibiotics and an anticoagulant – or natural treatments that will have the same effect, less the side effects.

That does not stop us also undertaking a liberating fast, to detoxify the body and encourage healing. Nor asking the right questions ... In fact, many people and institutions – and even [UNESCO in a publication of 256 pages](#) – are warning about the very special nature of the vaccine that will be proposed or even imposed, and that seems the real goal of this strange virus.

Moreover, said virus appears to benefit from a lot of fortuitous collusion or a kind of "passive complicity" that describes the positions and the implausible mishandling of the crisis in evidence, both by government agencies and by WHO.

Some do not hesitate to characterize WHO as "[the most corrupt organization in the world](#)" whose director, the Eritrean Adhanom Ghebreyesus, seems closely linked to Bill Gates, himself very concerned to "get seven billion human beings vaccinated" with this chip that he designed not with health as the goal, but population control for extremely dubious political purposes - it is difficult to fail to mention this without betraying our humanity.

Indeed, Bill Gates is notorious for having paid huge sums of money to WHO, which many claim helped appoint in 2017 – with the support of China – someone with a genocidal past in his own country, who was a member of the political bureau of the Tigray People's Liberation Front (TPFL), an organization listed on the Department of US Homeland Security's list of terrorist organizations.

In 2017, an Amhara ethnic rights organization, the [Amhara Professional Union \(APU\)](#), [accused Tedros Adhanom Ghebreyesus](#) of carrying out a full-fledged genocidal policy through forced vaccination, chemical sterilization and abortion, when holding the post of Ethiopian Minister of Health between 2005 and 2012.

The population of this ethnic group fell by 2.5 million between the 1997 and 2007 censuses. At the same time, the other major Eritrean ethnic groups reportedly saw their population grow by 2.6 per cent annually.

The TPFL was also accused of plundering Ethiopia and using the 3.5 billion dollars in aid received by Ethiopia (amounting to 60% of the national budget) for political repression of opponents (belonging to two majority ethnic groups). This extraordinary WHO director, who seems to be devoted to the goals of Bill Gates and his Chinese friends, served as Ethiopia's Minister of Health from 2005 to 2012, while at the same time serving as director – from 2009 to 2011 – of of an AIDS, tuberculosis and malaria programme funded by the Bill & Melinda Gates Foundation.

See the role of Dr. FAUCI. This troubled character is also a member of the board of directors of the Global Alliance for Vaccination (GAVI), an organization that works for the benefit of the pharmaceutical industry to impose multi-vaccination with RFID chips on the whole earth.

Good reason perhaps to question the surprising position of WHO regarding its oft-

repeated recommendation not to use anti-inflammatory drugs against Covid-19 and the oft-repeated statement of this world body that "there is no treatment to date" but that a vaccine is being studied.

In the light of the history of its promoters, God save us from it!

Worse still, it must be noted that Dr. Michael Ryan, Executive Director of the WHO Health Emergencies Programme, made the [following statement on 30 March 2020](#):

"At the moment, in most parts of the world due to lockdown, most of the transmission that's actually happening in many countries now is happening in the household at family level. In some senses, transmission has been taken off the streets and pushed back into family units. Now we need to go and look in families to find those people who may be sick and remove them and isolate them in a safe and dignified manner."

Whichever way you look at this statement, it is clear: the Executive Director of the World Health Organization's Health Emergency Programme is considering, in order to combat the coronavirus, organizing home visits to remove family members who may be infected.

He does not say how we will know if there are infected people in homes, since the tests are not reliable, but we know we will have to go get them.

This astonishing statement was followed by a moving and glowing speech by the Queen to the British people, which, however, had the effect of reminding the public of the abominable story of children abducted for their own good and then scattered throughout the British Empire at the end of the 19th century and also during the Second World War: many parents were later unable to retrieve their children and it took time to find out about all the sexual abuse, beatings, ill-treatment and slavery in mines that were committed for the benefit of these "good intentions".

Clearly, WHO plans to renew this charitable operation on the grounds of the coronavirus pandemic.

It is unlikely, however, that the French people, among whom are still many millions of sport shooters, hunters and reservists, will agree to allow their homes to be entered, at the risk of contaminating their families, by strangers drafted in by WHO who, on the basis of tests known to be highly unreliable, declare that they are coming to take away their children without any guarantees [especially if we refer to the history of this type of operation] – children whom the Civil Code obliges them to protect.

In the light of these sort of nauseating intentions, always carried out "for our own sake and for the sake of the children", we begin to see why WHO strives relentlessly for the disarmament of civilian populations ...

Throughout this investigation into the murky background of the WHO, the investigators of the health division of AORA [*Association des Officiers de Réserve d'Aix en Provence*], who approached this issue with an open mind, have obtained a clear impression of an organization whose passivity in this pandemic is astonishing, and which is guilty of causing serious disarray among medical services by the dissemination of protocols that have proved wrong, which is notoriously corrupt and whose intentions seem to be much more closely related to totalitarian ideology, eugenics and criminality than to concerns about the well-being of populations.

One cannot fail to notice that Bill Gates, who declared in 2011 "that there are too many people on Earth" is actively striving to provide a highly controversial vaccine to seven billion human beings ... but does not get his own children vaccinated.

Faced with this very murky scenario, a little discernment seems our best "survival technique".

A FUMIGATION OPERATION?

ELECTROMAGNETIC WEAPONS FOR A SILENT WAR

From the discussion above, one can reasonably derive a legitimate impression of distrust in certain institutions, presided over by characters who seem to be guided far more by corruption than by any considerations of public welfare.

But added to this, other people are raising their voices to challenge the very existence of COVID-19, which is "an assemblage of symptoms related to various pathologies artificially grouped under this heading" (London Real interview).

To recap, the RT PCR (*reverse transcription Polymerase Chain Reaction*) test, although used for this purpose, is not aimed at detecting the presence of the virus genome of COVID-19 disease, but only of "genetic material" that may have different origins.

Despite this, the people tested are diagnosed as infected with COVID-19 and their eventual death is then attributed to COVID-19.

What's more, the amplification cycle used (the sensitivity of the test), in different countries dictates the number of positive tests obtained. This makes it very easy to manipulate the numbers.

This test (invented in 1984 by a US biochemist) was originally developed to diagnose several things, for example to try to diagnose lung cancer. Its inventor states that "This test should not be used to diagnose infectious diseases". Koch's postulates, in force since 1890, is a protocol that makes it possible to prove that an infectious agent is the cause of what is claimed to have been detected. It has four elements.

In the case of COVID-19, not a single one of its four postulates was used or respected. As discussed above, when a cell is poisoned, it secretes exosomes (which are part of the immune system).

It may be poisoned by a disease, an infection, electromagnetic fields, stress or fear. These exosomes warn other cells that there is a problem.

As soon as a cell is poisoned, exosomes are released.

Dr. Andrew (Andy) Kaufmann took photos of exosomes under a microscope and compared them with photos of what is claimed to be COVID-19. These two photos were exactly the same.

Here you can see an [interview with Dr. Andy Kaufman](#), formerly of MIT (Massachusetts Institute of Technology), who contradicts the official thesis.

He then examined the genetic composition of the exosomes and that claimed for COVID-19, and it turned out that these two compositions are identical in all respects. Each attaches on the same cellular receptors. They are the same thing.

Thus this is a natural mechanism of response of the immune system of the human body, which has been renamed "COVID-19". For anyone presenting with any level of cell toxicity will produce these exosomes and thus the potential for positive tests of COVID-19 is infinite.

People fall ill in China. WHO then warns of a pandemic. Based on the information provided, anyone with influenza or pulmonary symptoms is presumed to be infected with COVID-19. But this is not convincing.

It is next determined that any sick person attending the hospital (for flu or cancer) will be tested for COVID-19 and will obviously be diagnosed positive since they have exosomes.

If these people die, they are officially diagnosed as having died from COVID-19.

And so the numbers rise. The total number of deaths in the world has not changed, but they are being reclassified as "COVID-19".

However, these people do not die from COVID-19, but after testing positive for COVID-19 (for example, from terminal cancer), which are two different things. According to the official figures of the Italian medical institution, 99% of the people said to have died from "COVID-19" in Italy suffered from one or more health problems for which they had been hospitalized. Then it is very easy to attribute to COVID-19 the deaths of people who died from something else altogether.

Thus one notes that the total number of deaths did not increase compared to the previous year during the same period, but this total figure includes the presumed deaths by COVID-19, which are the majority. This means that there is no increase in the number of people dying, but that their death is attributed to COVID-19, while they actually died from something else.

Let us look at what is happening in Lombardy, the centre of the Italian epidemic, which is the focus of much attention from the rest of Europe paralysed by fear: Lombardy, where Milan is located, is known all over the world for its polluted and toxic air, just like Wuhan in China.

Lombardy has a much higher number of deaths than in the rest of Italy, mainly due to lung problems. Usually just under 100,000 people die there every year.

Lazio, which is another Italian region, comes in second position, with almost half the number of deaths: 57,000.

Here you have a region of Italy where a lot of people die, mainly from lung diseases, and so you have a tremendous potential to make a diagnosis with the capacity to make people believe that they are dying from COVID-19, while they are actually dying from something else.

And this is how you control the numbers. When testing and diagnosing in a certain way, the figures increase. And then by tinkering with the sensitivity of the test, the figures decrease and can collapse in the same way.

The intention is to assign the maximum number of deaths to COVID-19, because it gives credibility to this pandemic. This is for one very significant and simple reason. And it is related to why there is a lockdown regulation.

What also happens is that elderly people hospitalized for any reason whatsoever are first of all tested for COVID-19. Many of them, for the above reasons, will test positive.

According to relatives and families, as well as carers on the ground, it is about new government directives consisting of signing a discharge in England for these elderly people - that the lockdown had to protect.

In France, there is a similar [government directive](#).

Article published in the *Libération* newspaper on the government advisory of 19 March 2020 to stop accepting "frail" people over the age of 75 in hospitals, which condemns our elderly to death in EHPADs [*residential care homes for the elderly*], while at the same time this same government forbids the application of Professor Raoult's protocol in the care homes and authorizes by decree the administration of a very strong drug to sedate the elderly (exactly the drug contraindicated for lung diseases). Treating them is forbidden, but a treatment that will give rise to death is authorized.

Which means that we will let them die and no resuscitation will be attempted. And when they die, without having been resuscitated, they will be part of the losses due to COVID-19. *"We are undoubtedly going to have to make choices, to decide who we are going to treat as a priority, and as far as the elderly are concerned, we are going to have to make more difficult choices"* – we are going to kill or allow these elderly people to die, who are asked to sign non-resuscitation forms, or who are targeted by government directives not to accept them in hospitals, not to apply treatment that can cure them, but for whom an injection deemed to be lethal is authorized.

Certain decision-makers seem disposed to abuse these elderly people in the vilest way, elderly people who are told that the lockdown is there to protect them.

The numbers are distorted by the way they do the tests, by the way they make the diagnoses, and the way cases are counted.

We could see the numbers rising again and again, which would justify further lockdowns.

It will be over – temporarily – when the natural and legal persons behind this manipulation think that they have achieved what they wanted to achieve, thanks to all this, that is to say the total destruction of the world economy, that a huge number of people lose their livelihoods and their independent incomes, and that they have therefore become dependent on the State for their survival.

Then these groups behind governments will put an end to all this and bring down the numbers indicating "peak is behind us", when they think they've gone far enough and got everything they wanted.

China has returned to its normal activities, industry is restarting, people are back on the street and air transport has resumed.

The goal is for the authorities to control the numbers.

They did not get an adequate number of deaths through this virus to justify the fact that it is deadly.

The vast majority of people have either no or mild symptoms. The RT PCR test cannot and does not detect the quantity of the "virus" present. We all have what people call "viruses", but which are actually part of the natural immune system, but we all have that in our bodies, at a level that will never cause us any problems. That's why you can be tested positive and not have any symptoms. What this test does not do is check the quantity of this "virus" present in your body. You have to have a huge quantity of this "virus" to be sick. Thus, they cannot even tell you whether your illness is due to this or

that virus.

The current death toll is not enough to justify the assertion that this "virus" is deadly. But they want a lockdown for much more important reasons.

So they say "Watch out for the next wave, which can happen at any time." According to the way they count, they can very well create a new wave, or the illusion of a new wave.

They have planned, if we let them, to push this to the extreme.

And here we are locked down, and in a few weeks we have gone from what people perceived as a free world to a global tyranny in which a very small number of people have billions, while half of the world's population is under house arrest.

And all this was done thanks to the COVID-19 scam.

There is strict compartmentalization, so that a handful of men can control the world. If you are at the top of the pyramid, you know the goals, but if you are a doctor, you are told "Here are the symptoms and if you see these symptoms, you must diagnose COVID-19. If someone goes into hospital, you must test for COVID-19. If people die, from whatever it is, you must write on the death certificate: COVID-19".

What is the common thread found in and after each tyranny? – "I was just following orders!" That's how it works.

But some nurses and some health professionals say that this is utter garbage! Some of them break ranks.

The WHO Director, who as minister of health was caught red-handed covering up three cholera outbreaks, will do what he is told. This is the driving force behind this policy. WHO was, notably, established by the Rockefellers. WHO tells you the procedure to follow and you follow it. You follow the protocol.

So, because China imposed this draconian lockdown and the numbers began to fall, it set a precedent for others to follow.

Like China, we're going to create a lockdown and keep people separated from each other. That's how this dynamic works. There are psychopaths in the background orchestrating all this, and then there are the ignorant ["Who Am I? Where am I? What's going on?": politicians "everyone is going to die, we'd better impose a lockdown".] who have no idea what's really going on. And with phony "modelling" and a virus that does not exist, an economic Armageddon will have been created.

Which brings us to 5G.

5G is a much larger power of electromagnetic energy than what we have seen before. It is not just an update of 3G or 4G, which are already harmful enough, but a whole new part of the electromagnetic spectrum, millimetre waves, more powerful than anything we have seen before.

The human body is an electromagnetic field.

The brain communicates with the rest of the body, and the cells process thoughts, information, electrically. When this electromagnetic field is in equilibrium, we are healthy. When in imbalance or disharmony, we feel malaise, we suffer from diseases, which are manifested in the form of what we call physical or psychological diseases.

We are now bombarded 24 hours a day and 7 days a week by electromagnetic fields generated by technology and WiFi. And in this period of restriction justified by this "virus", we see 5G being installed in more and more places.

Each rise in the level of radiation results in an [epidemic](#).

Doctors and scientists from 41 countries signed a petition calling for a ban on 5G. The impact of 5G on health has not been studied, otherwise it would never have seen the light of day. **5G satellites are irradiating every square centimetre of the Earth.**

Certain people want this to happen because they seek to manipulate humanity. 5G poisons the cells; they are poisoned by the electromagnetic field. The cells release the exosomes, and they will test you positive for COVID-19.

What was the first Chinese city to install 5G, just before the appearance of this "virus"? Wuhan. The city that had the most 5G mobile phone antennas in the world is the one in which a Covid-19 bloodbath took place.

During this lockdown, 5G antennas are being deployed at breakneck speed.

Everywhere around the world, 5G antennas are being installed in large numbers.

And while all these antennas are being installed, of course people cannot demonstrate, since they are under house arrest.

Week after week, Elon Musk (a very sick person – he is perfectly aware of the reason why 5G is being set up) is sending more and more satellites into low-Earth orbit, which will irradiate the Earth with 5G. His target is to send up 42,000. Astronomers can no longer observe the night sky. He received permission to install one and a half million terrestrial antennas *[groundstations?]* in America, which will connect to satellites through the electromagnetic field. He is creating an augmented reality thanks to 5G technology, which he calls the smart network.

These people are creating an umbilical cord thanks to which the human mind will be connected via artificial intelligence. And you are even given the year in which it will start in earnest: 2030.

Dr. Kyle-Sidell, an emergency doctor in New York, says that New York emergency physicians were prepared to treat an infectious lung problem. And that's not what he sees at all. He says he's never seen anything like it. He has never seen lungs in such a state.

The promoters of these technologies want to use 5G at a frequency of 60 GHz. If someone is affected by a frequency of 60 GHz, his or her body can no longer absorb oxygen, he or she will simply collapse on the street and his or her lungs will look like what Dr. Kyle-Sidell describes.

In fact, there is a strong presumption that there is a very clear correlation between the flows of people admitted to intensive care departments with lungs in a state "never before seen" and the 5G commissioning tests being frenziedly rushed out in New York, Wuhan and Lombardy, the first Italian region to be equipped with 5G.

The smoke screen of the "virus" (in fact simple exosomes) only serves to "cover up" these tests of electromagnetic weapons, which some declare are intended once in place to drastically reduce the world population, attributing to the "pandemic" the programmed destruction of a part of humanity – which, moreover, famous people and

power brokers do not hide, even in France.

Exosomes were mentioned earlier, in the section on 5G radiation: "5G electromagnetic radiation damages human cellular DNA. Exposed cells (of all kinds targeted in the human body) react by producing a cascade of protective immunological substances. These substances are conditioned in an intracellular structure called endosome. The endosome is expelled from the cell, thus becoming an exosome (Nobel Prize in medicine 2013). The exosome circulates and binds to ACE2 receptors in the lung, intestine and heart.

[The Nobel Prize in Physiology or Medicine 2013](#)

[Cellular transport breakthrough earns trio 2013 Nobel prize for physiology or medicine - video](#)

[Randy Schekman: Secretory Pathway: How cells package & traffic proteins for export](#)

[Prix Nobel de médecine 2013 : les transports vésiculaires à l'honneur \(Nobel Prize in medicine 2013: vesicular transport in the spotlight\)](#)

[Le prix Nobel de Médecine 2013 récompense la résolution du mystère de l'organisation des transports intracellulaires \(The Nobel Prize in medicine 2013 rewards the solving of the mystery of the organization of intracellular transport\)](#)

What if exosomes (alias "COVID-19") were not the cause of Covid-19, but in fact the consequence of the use of an electromagnetic weapon?

13. VACCINE AND ELECTRONIC CHIP

The epidemic, the absence of tests except for VIPs, the lockdown of the whole healthy population, the organized shortage of masks and tests, the government's ban on chloroquine treatment (available over-the-counter for 70 years without anyone worrying about the "precautionary principle" now used as an objection to confiscate this treatment) except for "severe forms" (translation: near death and when lung damage is irreversible), all this in addition to the media pressure – supporting death-counts – helped to stoke panic among the population.

Given such a degree of disorganization, it is difficult to evoke "incompetence" as everything seems to have been done deliberately and at the highest level to spread a false medical paradigm, destabilize the emergency services, expose law enforcement, promote the spread of the epidemic (right up to reopening elementary schools while a danger persists since public institutions remain closed at the same time) and hamper by any and all means the reduction of the viral load of infected people.

There is little doubt that popular wisdom, at a time when a vaccine is going to be proposed and probably imposed on us so that the firefighter/pyromaniacs can offer "the desired solution to the problem they themselves created", will recall that trust is like matches: it can only be made use of the once.

The chances are that the government will have a hard job making the French people believe that this vaccine that appeared in such a context of organized chaos contains anything whatsoever that would do anyone any good.

Army reservists have a long memory. During the Second World War, the "fifth column" worked for treason to manifest in the shape of disorganization (of the army). Troops armed with a MAS-36 rifle received cartridges for Lebel-Berthier rifles, and those equipped with Lebel-Berthiers (8mm) received ammunition for MAS-36s (7.5 mm). The only option left for the conscripts was to face the German tanks with bayonets.

Similarly, one may wonder whether there is an underlying motive for forcing French general practitioners to "lead a bayonet charge while under fire from machine guns,

while guys are shooting them in the back", as discussed earlier, and what exactly may be the motive for this situation.

The life-saving "vaccine", destined to free us from this chaos, about which we hear endlessly, obviously comes to mind.

Life-saving?

Some people – and this includes a UNESCO publication of 256 pages freely available on UNESDOC, *which we strongly recommend reading* – raise the disturbing feature of some vaccines containing nano chips and liquid crystals that can influence human behaviour, without concern for political ethics:

UNESCO: Nanotechnologies, ethics and politics

Listening to the actual statements of the "decision-makers" and their "advisers", the objective of the current operation may indeed be to inoculate populations with a very special vaccine.

Thus, the fear created by the "pandemic" would aim to "force" populations into a "vaccine" that UNESCO has provided warnings about and which is known to actually include nano chips, means of biometric identification, and liquid crystals.

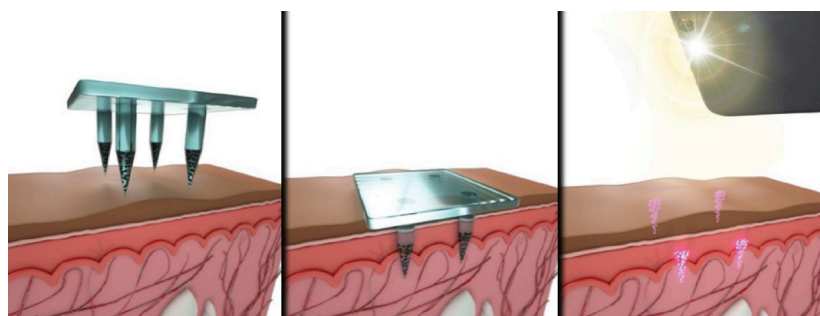
When the information leaked in 1996, some of the journalists involved having unfortunate health accidents, the information that "the elite" was about to "chip" populations seemed implausible.

Today, horses, dogs, cats and millions of humans in the world and even in Europe are "chipped" and we are surrounded by these invasive technologies.

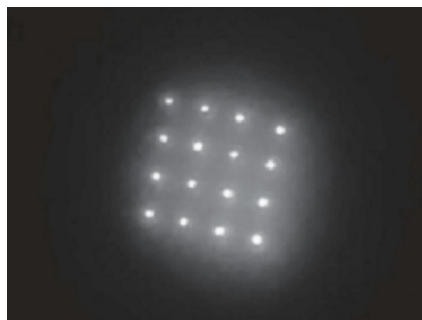
Mass vaccination is part of a first step towards this agenda, which has been enacted and is called ID2020.



Bill Gates at the ID2020 Conference – Summit 2019 – promoting the vaccine containing the electronic nano-chip "marker" intended to "mark" and control 7 billion humans (but he does not have his children vaccinated). This is the same Bill Gates who hopes to reduce the world's population "with good results on new vaccines" ([TED conference 2010](#) – see sources).



Applying a quantum dot tattoo to the skin through vaccination
Science Translational Medicine-December 2019
(copper-based nano-crystals)



A vaccination notebook under the skin: the geometric figures
appear fluorescent when read with a special smartphone

K. J. McHugh et al., Science Translational Medicine (2019)/AFP-K. J. McHugh

According to some sources, the Bill & Melinda Gates Foundation has taken control of WHO
Anthony FAUCI decides to do without animal testing for vaccines (due to catastrophic results
and to switch directly to injection on humans, but Bill Gates is demanding total immunity legally
in the event of vaccine side-effects (*see video references*))

This ID2020 Alliance was formalized in May 2016, at the United Nations headquarters in New York, and brings together for the ID2020 agenda a private and public collective of governments, non-profit organizations, universities, more than 150 private sector companies and 11 United Nations agencies, which have collaborated to develop and **provide a unique digital identity for all humans**, by 2030, with "political unity", "global connectivity", an "emerging technology" and a "new model of identity" **closely interlocking this digital identity with access to commerce** and secure access systems.

Translation: those who refuse to be implanted will no longer be able to sell or buy anything and will be completely marginalized.

Thus, this biometric "marking" will be such as to establish total control of populations, an acknowledged goal of the "New World Order" touted in recent years by many political figures (*see sources*).

This is clearly an electronic enslavement of humanity. It is clear that the "pandemic" will be used initially to implant "coronavirus tests to permit people to work" or to "guarantee vaccination, with chips being implanted during vaccination".

Bill Gates' pronouncements clearly indicate this intention (*see sources*).

But in addition to ID2020, there is also GAVI:

"GAVI (*[formerly the]* Global Alliance for Vaccines and Immunization) is funded in part by the UK government and has many representatives of the pharmaceutical industry

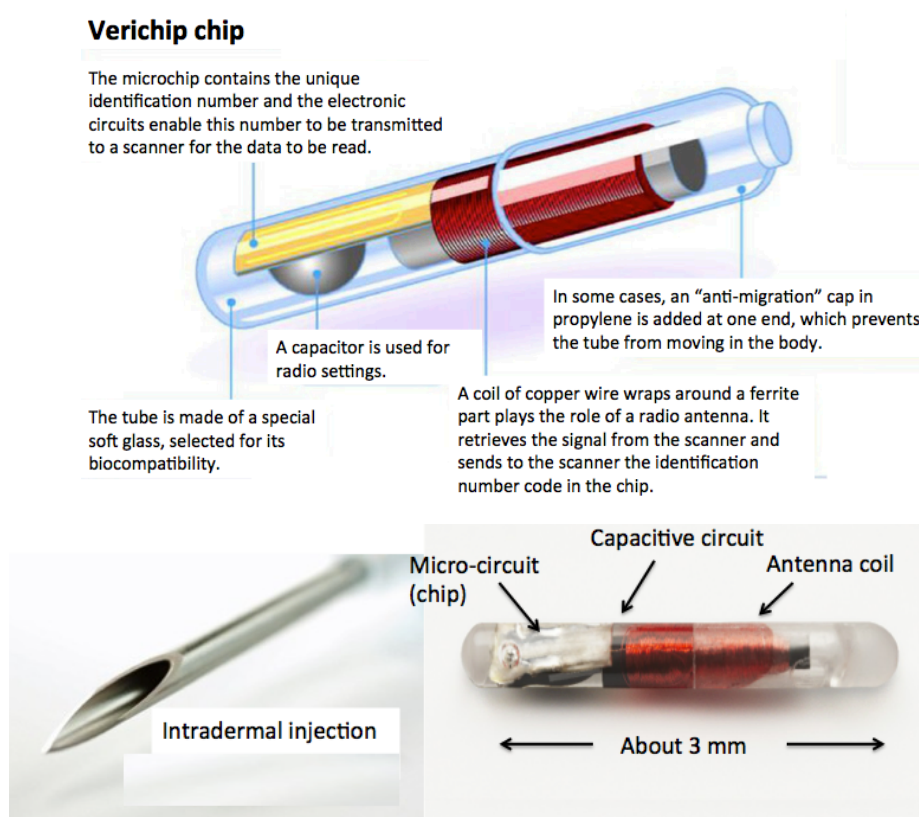
on its board of directors. This group sets the price of vaccines and stimulates demand. The Advance Market Commitment (AMC) is a special funding mechanism established in 2007 by GAVI and six donors (Canada, Italy, Norway, the Russian Federation, the United Kingdom, and the Bill & Melinda Gates Foundation) to stimulate vaccine development. It is clear that vaccine manufacturers, government agencies and financial institutions are integrated into the revolving door of a vast industry that is constantly pushing the "pandemic" button in the hope of a global vaccination programme. Corruption in this agency is well documented (*see sources*).

These vaccines that "the globalist elite" wants to make widespread include known toxic adjuvants (aluminium), RFID nano-chips and liquid crystals, and as UNESCO warns, aim to transform humans into a connected commodity.

The second step of this deception, after having ensured the "biometric identification" of the world's population, will consist of mandatory **implantation of a subcutaneous electronic chip**, which will be imposed "for our good, for our safety" and which, with supporting cryptocurrency, will marginalize all the recalcitrants, who will no longer be able to sell or buy anything anywhere on Earth. That is the goal.

In order to obtain a **purely virtual currency**, necessary to enforce implantation of the electronic chip, physical money will be made responsible for causing contamination with coronavirus (*see sources*).

A "universal income" can even serve as bait, leading people to accept electronic chipping.





Chip implanted into employees of the American company Three Square Market

This "bio-chip" subcutaneous electronic chip will be presented as very convenient for paying for purchases and authorizing access. But, apart from the fact that this technology has flaws and that personal data stored on the chip can be hacked (innovative identity theft), media communication will focus less on the more worrying aspects:

- **Ability to influence the behaviour of the chip-bearer** (manipulate and control crowds)
- Ability to eliminate categories of people (reduce the world population)
- Ability to permanently locate the bearer (exit civil liberties).

These technologies exist and have been patented.



These implants, which are primarily location tags like all RFID (radio-frequency identification) technologies, have the possibility of releasing cyanide or viral loads (see *sources*), and can influence the behaviour of the carrier [impact of microwaves on neurotransmitters (chemical compounds released by neurons) and on the production or inhibition of hormones (messenger molecule produced by the endocrine system) – such as adrenaline which controls aggression and heart rate]. Once the chip is in place, the carrier no longer owns him- or herself.

That being said, vaccination is a medical act.

In France, **"no medical act or treatment can be performed without the free and informed consent of the person and this consent can be withdrawn at any time"** (article L1111-4 of the Code of Public Health as amended by Law No. 2016-87 of 2 February 2016 - art. 5).

Even if a decree were to impose a compulsory vaccination, by the principle of the hierarchy of legal norms, this decree would be void as it would have no legal basis.

Indeed, the declaration of a state of health emergency gives power to the prime minister to take general measures (...) by decree, taken on the report of the minister in charge of health, for the purpose of combatting the health disaster referred to in article 4. >> "(Draft emergency bill to deal with the Covid-19 epidemic)



As we look at events surrounding the "COVID-19 pandemic," various questions remain unanswered. On Oct. 18th of 2019, only weeks prior to ground zero being declared in Wuhan, China, two major events took place. One is "Event 201," the other is the "Military World Games," held in none other than Wuhan. Since then a worldwide push for vaccines & biometric tracking has been initiated.

At the forefront of this is Bill Gates, who has publicly stated his interest in "reducing population growth" by 10-15%, by means of vaccination. Gates, UNICEF & WHO have already been credibly accused of intentionally sterilizing Kenyan children through the use of a hidden HCG antigen in tetanus vaccines.

Congress & all other governing bodies are derelict in duty until a thorough and public inquiry is complete.

FAILING ETHICS

Among the measures that have undermined confidence in the executive is Decree No. 2020-360 of 28 March 2020, supplementing Decree No. 2020-293 of 23 March 2020 prescribing the general measures necessary to deal with the Covid-19 epidemic in the framework of the state of health emergency (NOR: SSAZ2008744D, published in JORF [Journal of the French Republic] No. 0077 on 29 March 2020, text No. 11), which was taken on 28 March 2020 to allow any doctor to give an injection of Rivotril to elderly people "likely to be affected" by the SARS-CoV-2 virus, without the advice of another doctor, without the consent of the patient or family, and without the supervision of an examining magistrate – this being done under the pretext of an emergency situation.

A box of 6 injectable ampoules of Rivotril costs 3.64 euros incl. VAT.

Although some "scientists" dispute that the use of this product in a "palliative" context involves any lethal intent, Clonazepam and Rivotril are notoriously contraindicated for severe respiratory failure.

People in respiratory distress are going to be given injections of a potentially lethal product, the use of which in this medical context must be absolutely avoided.

"It is at best dangerous, and then constitutive of the crime of endangering the life of others or of manslaughter (*with the aggravating circumstance of premeditation*), at worst criminal – which is obviously the case in such a context" (Dr. Nicole Delépine, Dr. Joseph Hardy).

This means that, to alleviate the suffering of vulnerable people "likely to be affected" by Covid-19 (therefore in respiratory distress, thanks to SARS), they will be injected on instructions from the executive with products having the effect of death by suffocation.

We emphasize that euthanasia is not allowed in France, but that murder (intentional homicide with premeditation) is punishable by life imprisonment, and that the accomplice is punishable by the same penalties as the main perpetrator.


Complicity consists of acts of provocation, instructions given, and provision of means, help and assistance.

Reference to a decree will not protect the perpetrators and accomplices from criminal proceedings. Both criminally and morally, these are none other than murders.

Many carers have gone against the directives.

This decree intended to authorize injections of Rivotril is signed by Prime Minister Edouard Philippe and his Minister of Health Olivier Véran.

In the same vein, a "triage" was clearly in operation, with no patients over 70 years of age admitted to intensive care in hospitals in Ile-de-France (*see sources*). The incriminating ARS [regional health agency] Ile-de-France circular cites "difficult choices and prioritization in the emergency" while emphasizing the principle of a decision about admission based on "age (to be taken especially into account for COVID patients)". With regard to the USLDs and care homes, the document refers to a "collegial decision not to admit to intensive care".

Décision d'admission des patients en unités de réanimation et unités de soins critiques dans un contexte d'épidémie à Covid-19		
	RECOMMANDATIONS RÉGIONALES COVID 19	Création : R. Hellmann
		Validation DM : nom/date
		Approbation : nom/date
		Validation : nom/date
COVID-19	Décision d'admission des patients en unités de réanimation et unités de soins critiques dans un contexte d'épidémie à Covid-19	Version : 1
		Date : 19/03/2020
		Rédacteur : A. Fouchier
		Diffusion : externe
Chemin d'accès (sera complété par la cellule doctrines)		

This document aims to provide conceptual support to all healthcare teams
Ce document vise à apporter un soutien conceptuel à toutes les équipes soignantes

Le contexte

Le contexte est celui d'une **pandémie mondiale inédite en taille, en extension, en gravité et en mortalité**. L'afflux de patients en condition grave, voire en défaillance vitale pose la question de situations où **l'équilibre entre les besoins médicaux et les ressources disponibles est rompu**. Ces patients sévères peuvent arriver d'emblée aux urgences, ou se détériorer après avoir été en secteur d'hospitalisation, ou encore solliciter les urgentistes à partir d'unités de soins de longue durée. Dans un contexte d'exception où les ressources humaines, thérapeutiques et matérielles pourraient être ou devenir immédiatement limitées, il est possible que les praticiens sur-sollicités dans la durée soient amenés à faire des **choix difficiles et des priorisations dans l'urgence** concernant l'accès à la réanimation. Les principes éthiques de justice distributive, de non-malfaisance, de respect de

Les principes d'une décision d'admission en unité de soins critiques.

Malgré la situation d'urgence sanitaire, **la procédure collégiale** définie par voie réglementaire au décours de la loi Clays-Leonetti **sera respectée, en insistant sur les principes suivants** :

- La collégialité : si la décision reste de la responsabilité d'un seul médecin, elle est prise après une concertation avec l'équipe soignante (la continuité de cette collégialité doit être organisée avec au moins un autre médecin, et un représentant de l'équipe paramédicale).
- Le respect des volontés et valeurs du patient : exprimées directement ou indirectement par les directives anticipées, ou rapportées par la personne de confiance ou les proches.
- La prise en compte de l'état antérieur du patient, ce qui comporte au minimum :
 - sa fragilité évaluée par l'échelle CFS (cf. ci-dessous)
 - son âge (à prendre particulièrement en compte pour les patients COVID)

A propos des patients hospitalisés en USLD et en EHPAD : les mesures de confinement et d'isolement doivent être appliquées à la règle dans cet environnement de patients fragiles à haut risque d'infection. Par ailleurs, les régulateurs du SAMU doivent avoir un accès facile aux éventuelles directives anticipées et aux notes écrites dans le dossier médical. Ainsi, un médecin d'astreinte doit pouvoir être contacté H24 pour participer le cas échéant à la décision collégiale de non admission en réanimation. Une réflexion sur les modalités optimales d'information des familles doit être entreprise dans un contexte d'interdiction de visites et de possibilité de dégradation brutale.

Obviously, "in a context of prohibition of visits" the hospitalized elderly patient no longer enjoys the protection of his or her family, and the decision to live or die is subject to "a collegial decision" with the "conceptual support" of the ARS Ile-de-France.

Although we perceive "political speak" under these oratory effects, we still understand its meaning.

And its effect.

Many other provisions tend in the same direction as the decree recommending injections of RIVOTRIL to patients "*likely* to be infected with the SARS-CoV-2 virus" whose clinical condition justifies it, therefore a priori in a state of respiratory distress and even when RIVOTRIL "should not be used in cases of severe respiratory failure" (contraindications, see Vidal).

Decree No. 2020-293 of 23 March 2020 prescribing the general measures necessary to deal with the epidemic of covid-19 in the framework of the state of health emergency

- Chapter 7: provisions relating to making medicines available

Article 12-3

- Created by Decree No. 2020-360 of 28 March 2020-art. 1

*"II.- By way of derogation from article L. 5121-12-1 of the Public Health Code, the pharmaceutical specialty **Rivotril**® in injectable form may be dispensed, until 15 April 2020, by retail pharmacies for the management of patients affected by or **likely to be affected by** the SARS-CoV-2 virus whose clinical condition justifies it upon presentation of a medical prescription bearing the words "Prescription outside the WMA [World Medical Association] in the framework of covid-19".*

*"When prescribing the proprietary medicinal product referred to in the first subparagraph outside the scope of their marketing authorization, the physician shall comply with the exceptional and transitional protocols relating, on the one hand, to the management of dyspnea and, on the other hand, to the **palliative management** of respiratory distress, established by the French society for accompaniment and palliative care and posted on its website.*

"For info, the SFAP website:

www.sfap.org/system/files/propositions_therapeutiques_dyspnee_asphyxie_covid.pdf

*This protocol provides for an injection of benzodiazepines: in order to sedate the patient, "inject the provided sedation protocol" and "after **the episode**, take time with the family and caregivers".*

How elegantly such things are said!
Some people are veritable masters of the art of euphemism.

The leaflet for RIVOTRIL published by VIDAL needs no additional comment:

Contraindications of RIVOTRIL

This medicinal product should not be used in the following cases:
severe respiratory failure

Contre-indications du médicament RIVOTRIL

Ce médicament ne doit pas être utilisé dans les cas suivants :

- insuffisance respiratoire grave,

<https://eurekasante.vidal.fr/medicaments/vidal-famille/medicament-mrivot01-RIVOTRIL.html>

CLEARLY INCOHERENT MEASURES THAT LEAVE US WONDERING

At this stage of our investigation, we cannot exclude or ignore the fact that this virus and the accompanying vaccine were created for the purpose of population reduction, and for the purpose of engaging peoples in a programme of electronic serfdom.

Now that we have arrived at the moment of "de-quarantining", there is now the issue of sending children back to kindergartens and schools, even though the risk is sufficient to maintain the closure of establishments visited by the general public (cinemas, restaurants). This is inconsistent.

For if the return to school is now presented as "voluntary" (after an outcry from parents), the financial pressure is strong because the Ministry of Labour has stated that, in order to continue to benefit from partial unemployment, parents will have to provide "a certificate providing evidence that the school is closed or cannot accommodate a child". Resumption of classes, therefore, not mandatory but mandated.

To better spread the virus in families?

To hit us where it hurts?

In such a context, if laws were so far the guarantor of a certain "social peace", civil disobedience may well now be the only avenue to salvation.

14. ANALYSIS

Upon completion of its research, the Investigation Group that carried out this study would like to affirm with conviction that this **virus does not appear to be of natural origin and that it is unlikely that its spread is accidental, given the safety protocols surrounding P4-level laboratories.**

These factors must be pointed out as they are fraught with consequences in terms of the response they imply, both in terms of prevention and treatment paths that we have been able to identify.

Even the management of the crisis by WHO leaves us astounded.

This being said, the virulence of severe cases of Covid-19 appears to be related to a cytokine shock (or cytokine storm or cytokine release syndrome), which is an **excessive production of cytokines triggered by a pathogen** and which takes the form of a severe inflammatory response of the immune system. This is an inappropriate, harmful and generally fatal response without proper treatment.

According to reports, this explosive inflammation results in **generalized venous thromboembolism, mainly pulmonary.**

It is therefore imperative first of all to prevent contagion by preventative actions, then – in the absence of any official treatment to date – by the preventative use of natural dietary supplements known for their **antiviral** activity (reduction of viral load), **antibacterial** (risk of co-infection, suspected role of Prevotella), **blood thinning** (thrombosis), and especially **anti-inflammatory and regulatory of the immune system** (cytokine shock).

In terms of medicine, it is common practice for effective antiviral and antibiotic treatments to be provided **well before** a severe pathology leads to the patient being taken to intensive care and causes irreversible body damage, in order to decrease the viral load early and to control the possible bacterial co-infection (which means that claiming that treatments given late are ineffective is intellectually dishonest).

The official recommendation of WHO in particular not to use anti-inflammatory drugs in the case of someone affected by Covid-19 is highly questionable, not to say criminal, given the proven existence of a cytokine shock. The Malagasy government is successfully using, against the advice of WHO, a "miracle" drug, "Covid-organics" developed by the Malagasy Institute for Applied Research (IMRA). This drug, based on known local medicinal plants (such as artemisia), enabled the government to end the lockdown in Madagascar. However, it will not be available in France to end the health crisis, the director of the ARS de la Réunion (located 800 km from Madagascar) having indicated that it is "a strategic decision" and that this decision was taken by the

French Ministry of Health, after several months of tests", the National Academy of Medicine confirming this position by "issuing a warning".

The CT essential oils of artemisia (artemisia vulgaris, artemisia arborescens) are not available off the shelf in France and their sale is regulated.

However, it is well known that nature ignores abstract financial and administrative barriers and common mugwort (Artemisia vulgaris) is a perennial plant found in almost all regions of France.

Thus, at a time when the **"precautionary principle" may seem to some dilatory and in circumstances where natural treatments thus find a new legitimacy**, some dietary supplements remain available: such as the CTEOs of Ravintsara or Saro, also originating in Madagascar and whose antiviral properties are known.

At this stage, we note that effective natural treatments available off-the-shelf against COVID-19 exist, in particular:

- **Essential oils (aromatherapy)**
- **Green clay (and magnesium chloride)**
- **Quercetin.**

The question that currently arises among scientists is whether, once the patients have been "cured" and the symptoms have disappeared, the virus disappears from the body or whether it **remains lurking** in order to peacefully coexist with the human body, as other viruses do.

With the risk, as Professor Montagnier has clearly warned us, that the pathogenic power of this very complex virus, which seems to have benefited from the advances of molecular biology, is awakened by the generalization of 5G mobile phone antennas across France.

In addition, the finding that **bacteria of the genus Prevotella** (present in the intestines) appeared to contain sequences of the SARS-COV-2 virus, as if the virus had infected the bacteria, which could explain the significant variations in the viral load from one test to another in the same person, as if the virus was hiding somewhere.

The hypothesis that emerges is that the virus infects the **bacteria, which then become virulent**, causing that sometimes fatal inflammation. The hypothesis becomes all the more plausible when we learn that infections involving Prevotella are already known to cause respiratory symptoms, including acute ones.

Is this why antibiotic treatments (macrolides + C3G, or azithromycin combined with hydroxychloroquine) are effective against the infection?

Unless, of course, as Dr. Christian Tall Schaller argues (contrary to the Pasteur dogma on which the modern conception of medicine is based), the virus theory is completely wrong? Could it be that these are only a unit of information, the messenger and not the cause, a simple alarm signal passing from cell to cell to warn of an imminent danger (which would explain that the proximity of an eminently toxic 5G antenna causes the number of messengers to explode and trigger a catastrophic immune response)?

And that one has only to **fast in order to detoxify oneself**, and live healthily in a world where life is not our enemy ...

If fasting is an essential weapon of our immunity, this virus seems to actually exist and be of artificial manufacture.

In the final analysis, if indeed this virus was laboratory-manufactured with the intention of drastically reducing the world population – as we believe to be the case after our investigation – and is very likely to be aggravated by the use of a "vaccine" actively promoted by Bill Gates on the one hand and on the other hand by exposure to 5G radiation (from which it will be necessary to protect oneself), or even by aerial spraying (chemtrails), it is not unreasonable to think that the message it transmits to cells and bacteria is not at all natural but was precisely designed in the laboratory to seriously disrupt the immune system and push it to violently attack the body.

DIFFERENCE BETWEEN CONTRAILS AND CHEMTRAILS

A contrail is a condensation trail; it is short and quickly disappears after the passage of the aircraft. A chemtrail is a spraying of chemical or nanoparticle of heavy metals (barium, aluminium) or viruses, which persists after the passage of the aircraft. The chemtrails usually form grids, then the trails spread to form a dirty veil over the earth.

According to Dr. Andy Kaufman, an MIT alumnus, this whole thing is just one vast smoke screen.

He compared photographs of exosomes and what is presented as a photograph of COVID-19 and indicates that the two photos are identical in all respects

The same applies to the genome, which is absolutely the same.

He concludes that official bodies (chiefly WHO) knowingly misinformed medical authorities and researchers in order to pass off an exosome, which is a natural mechanism of the organism, as a new virus.

Whenever a cell in the human body experiences stress or a toxic situation, exosomes detach themselves and attach to the receptors of other cells: this is a warning message.

However, Dr. Kaufman's affiliation with MIT, which is closely linked to the eugenic intentions currently in play, persuades us to exercise caution before embracing his hypothesis.

In our opinion, the virus actually exists, it is of artificial manufacture (even if a certain mystery cannot be ruled out as the supporters of the exosome thesis indicate). But the fear that surrounds the virus is more dangerous than the virus itself: fear enables the establishment of enduring totalitarian structures, drones in support, the "mandatory" vaccine including a chip, which will be imposed under the cover of a health emergency and which will be many times more dangerous than the virus itself.

The intention to reduce the world's population is real.

But according to our sources, Covid-19 is only the first salvo: the means that will be used will be, on the one hand, mass vaccination, the "chipping" of humanity (which has begun and which the "elites" now openly discuss), and on the other hand, the installation of 5G antennas, then finally the aerial spraying of new viruses (you must not leave home!).

Indeed, during the lockdown, the operators were authorized to install their antennas at will, free of all rules.

The "virus" is only there to test our reactions, launch a population reduction starting with the most fragile populations – see bloodbath in care homes - **divert attention and prevent suspicions of lethality being directed towards 5G technology** by the focus on a pandemic.

The "virus" is especially useful to introduce liberticidal laws and to divert attention from electromagnetic-weapon-testing on populations, for example in Lombardy, New York, Wuhan, Paris and the Grand-Est region of France. And the appalling lung damage caused by these 5G antennas, turned up temporarily to full power, would thus be attributed to "COVID-19".

Apart from the direct victims of these exposures to electromagnetic waves, the statistics of the "pandemic" have been completely distorted, justifying measures under "health emergency laws" amounting to confiscation of public freedoms and, much worse, justifying government decisions to shorten the suffering of older patients by injections of notoriously lethal substances (even if this is not openly stated, all caregivers know) to "avoid crowding intensive care beds" at a time of health emergency.

If this were confirmed, it would, of course, be a crime against humanity. The most heinous ever committed.

In our view, this is only the beginning of an ongoing operation.

We set out to find out how to protect populations from viral pneumonia as a precautionary measure and – in the face of the generally observed mismanagement and chaos – as a curative measure, by assembling a list of the natural means available to the public.

It did not take long for the multiple instances of "incompetence" (such as the blatant lack of masks and screening tests, including for caregivers whose concerns have been much discussed) to take on overtones of calculation reeking of totalitarianism. More than one of our investigators was shocked by government positions, particularly with regard to the sudden prohibition of treatments such as chloroquine (which has been on the market for 70 years without ever being problematic) and Ibuprofen.

WHO and the national medical authorities stated about the theory of lung infection that it was imperative not to take anti-inflammatory drugs, while stressing "that no treatment was recommended to date" to treat a "pandemic" over which the media was sowing panic by providing a daily death count.

But very quickly the feedback from frontline doctors started to contradict the official recommendations. They proclaimed that they had been "bamboozled" and that the lung disasters they were treating "had nothing to do with the viral pneumonia they had been prepared to treat".

These doctors, visibly shocked, emotional and outraged at what they presented as a **deliberate destabilization of emergency services by a "medical paradigm that turns out to be false"** (sic) warned that the disorders found were rather a "mainly pulmonary, generalized venous thrombosis" caused by a cytokine shock, that is, a fatal hyper-inflammation following a well-known explosive reaction of the immune system.

Many frontline doctors – who were banned from prescribing for the first time in history – started to use alternative treatments (such as Professor Raoult of Marseilles: azythromycin + hydroxychloroquine) – but these were immediately confiscated by a government acting by fiat in a "health emergency".

Yet the city of Marseilles, benefiting from the introduction of this treatment, had a tiny number of deaths, which made the determination of the "medical authorities" to discredit Professor Raoult all the more incongruous, for all to see.

But beyond the profit motive and conflicts of interest of pharmaceutical laboratories, was there another motivation?

During this time, contradictory information continued to reach our investigators despite the lockdown and it turned out that the French frontline practitioners were managing to cure the diseases using **anti-inflammatories, anti-coagulants and the combined administration of 2 antibiotics** (for example, Dr. Paliard-Franco's treatment of macrolides + C3G).

Italy was also treating patients with anti-inflammatories, anti-coagulants and antibiotics and confirmed both the American and French frontline observations, directly contradicting the recommendations of WHO and the French government not to take anti-inflammatory drugs.

The caregivers' observations that no patients with rheumatoid arthritis (thus treated with anti-inflammatory drugs) had been admitted by the hospital services continued to mount and were corroborated by our own observations.

At this point, it was becoming difficult not to give credence to the public accusations of corruption against **WHO (whose stance indeed appeared to be very strange)** and particularly against its Director, notoriously linked to leading figures actively promoting a "vaccine" not yet in existence but which "would soon be ready".

However, while WHO was also talking about this vaccine, presented as indispensable "in the absence of a recommended medical treatment", **UNESCO was warning, in a publication of 276 pages, about the existence of vaccines violating the rules of political ethics** and containing invasive nanotechnologies.

During this same time, the clue of Prevothella caught our attention, being an intestinal bacterium used by the virus to camouflage itself and cause a cytokine shock. The publication of the 2013 Nobel Prize in Medicine highlighted the existence of exosomes, a sort of outgrowth that detaches from cells in a "stress" situation to carry a warning message by going to fix itself on the receptors of other cells.

Like viruses, these exosomes therefore appeared to be "information units". But the existence of exosomes, a known immune phenomenon, does not contradict the existence of a virus (even if we allow for some confusion between these two elements).

Another Nobel prize-winner, Professor Montagnier (2008), warned that this virus was undoubtedly of laboratory manufacture, **that frequencies could influence its structure and that exposure to 5G mobile phone antennas in particular gave it an increased pathogenic power**. Professor Montagnier – like Professor Raoult before him – was immediately attacked to discredit him, which was not enough to extinguish our interest, aroused by the fact that there were 10,000 5G mobile phone antennas in Wuhan, the city presented as the origin of the "pandemic".

Interestingly, the map of the "pandemic" and the map showing the location of the 5G antennas seemed very much to overlap, at least in Wuhan and Lombardy. In France,

the government had visibly taken advantage of the lockdown and emergency laws to authorize operators to install 5G antennas free of all rules.

This emergency measure, which was obviously intended to go on forever (without any consideration as to public health) appeared to be as inconsistent as the directives not to hospitalize the elderly, to prohibit treatment that could cure them in care homes but contrariwise to allow the administration of injections intended to relieve their suffering, but which in reality are deemed lethal and notoriously contraindicated for respiratory disorders.

This planned euthanasia was all the more troubling as it took place in a context of authoritarian pension reform, which was controversially supported behind the scenes by financial institutions (Jean-Pierre Delevoye, High Commissioner for Pensions, who resigned following the disclosure of his links with IFPASS [*Institut de formation de la profession de l'assurance* or Institute for professional insurance training], a sector with a financial interest in the reform).

Thus, it was **impossible not to notice that the "precautionary principle" varied in fact according to circumstances and the case of the "pandemic" appeared to be fraught with conflicts of interest and corruption.**

Information relating to the work of Dr. Andy Kaufman, formerly of the famous MIT and of the US Ministry of Health, was brought to our attention (in addition to the positions of alternative doctors questioning – perhaps rightly – the role of viruses in any pathology and describing them as "a unit of information and not the cause"), who states that the virus responsible for COVID-19 does not exist and that what is presented as such is none other than the exosome mentioned above (which is a warning message, a production of the cell faced with a toxin (poison, fear, electromagnetic radiation)).

He states that he made a comparison between the photographs taken with a microscope and the respective genomes and states that these elements of comparison are identical in all respects. The statistics are therefore falsified, due to an RT PCR test whose sensitivity can be adjusted to the desired outcome – in other words, it can be made to say anything. But Dr. Kaufman's career and affiliation with MIT tend to diminish his credibility. We repeat, for us the virus is real, even if, in the chaos wilfully generated by the nexus of people behind the "pandemic", anything is possible.

The existence of some – rare - atypical symptoms in the landscape considered by our investigators, or even some deaths of police officers who were particularly exposed (and not supplied with masks), and the existence in some places of major lung disasters (such as in Wuhan, New York, Lombardy, and even Paris) reported by doctors in a state of shock do seem indisputable.

However, those areas where the "pandemic" is highly pathogenic (cytokine shock-type) appear to correlate with 5G tower installation areas, which may well corroborate the hypothesis of the commissioning of tests in line with the intentions of the promoters of these technologies to **"raise 5G to a frequency of 60 GHz"**.

Thus, patients suffering from terrible lung damage, described by distraught emergency doctors (see the videos of Dr. Kyle-Sidell and in France those of Dr. Alain Scohy and Dr. Gilles Besnainou) would be victims less of any virus than of full-scale tests of an electromagnetic weapon, designed and used as part of a comprehensive plan with several objectives, and which would increase its pathogenic power.

The "virus" we have investigated is actually only one part of a large-scale operation combining biological and radiation weapons, supported by a smoke-and-mirrors operation, orchestrated by a **notoriously corrupt WHO, which has contributed to**

sowing confusion among the ranks of caregivers, and whose instructions and recommendations are factually the exact opposite of the observations and recommendations of emergency workers on the ground.

If, according to CBRN [*chemical, biological, radiological, nuclear*] terminology, it really appears to be a "war", as the president of the French Republic has repeatedly stated, it could well be that it is not an exclusively biological conflict, but a combined biological and radiological war. A war on peoples

Indeed, in that case, and after the de-quarantine, the "second wave" – if second wave there be (does reopening schools meet this objective, when it is inconsistent with keeping restaurants closed on the grounds of a continued risk?) threatens to be even more deadly, simply because the 5G antennas installed by stealth during the lockdown will be in place, with some stressing that pathogenic "vaccines" will then be ready and aerial applications will likely resume to disperse new biological agents.

CONCLUSIONS

The conclusion is inescapable that glaring inconsistencies and inexplicable "lacunae" invalidate the official theory and that the management of the equally inconsistent health "crisis" seems to be a pretext for a totalitarian global takeover.

What appeared to us to be both a biological and electromagnetic war supported by a vast "smoke-and-mirrors" operation undeniably masks massive corruption at the heart of WHO and the most unavowable intentions.

If the existence of a virus cannot at all be ruled out, and if therefore "preventative actions" have to continue to be applied until the end of the health "crisis", **an electromagnetic war is undeniably at work behind this smokescreen**, which is sowing confusion among the ranks of medical and hospital personnel.

It is demonstrable that many antennae were installed thanks to the lockdown, without concern for the "precautionary principle", despite the fact this is otherwise widely cited, in particular to hobble medical treatment. Although technologies such as [*the ionospheric heaters*] HAARP [*US*] or SURA [*Russian*] immediately come to mind, 5G installations, both terrestrial and aerial (Elon Musk's satellites in low-Earth orbit), are clearly part of this "total war" project.

It is impossible to fail to notice the similarity between the lung damage observed by all emergency doctors in the context of the COVID-19 epidemic and the damage caused by the use of an electromagnetic weapon, in addition to permanent headaches, increasing fatigue, burning sensations in the lungs, thrombosis and loss of sensitivity to smell and taste, which are also cited as symptoms of COVID-19.

In relation to this, Dr. Jeremy K. Raines, an authoritative electromagnetic field engineer, reports that signals are used by the human body to regulate its processes, and warns that external electromagnetic signals can seriously interfere in this process. Undoubtedly to the point of disrupting the immune system.

Furthermore, the intention to impose a global cryptocurrency, a vaccine with nano-chips and a subcutaneous electronic chip clearly reflect totalitarian machinations.

But although it has been established that industrial activities (mining activities, oil and gas extraction, geothermal) can induce earthquakes in some cases, no investigation has been carried out on the reaction of the Earth to the massive use of 5G technology.

However, since the 5G tests carried out with the approval of ARCEP [French regulatory authority for electronic communications and posts], unusual earthquakes – soon forgotten – have caused tremors in France, particularly in November 2019, and municipalities have been declared to be in a state of emergency. If we add to this the fact that solar flares – thought to be closely correlated with volcanic activity – are such as to make all electronic systems suddenly inoperative, the game of sorcerer's apprentice that some international players in industry and finance are engaging in could well lead us to a highly uncertain future.

Be that as it may, the involvement of 5G is highly suspected in the present health disaster, either in terms of exposure to such electromagnetic radiation having highly potentiated the pathogenic power of the virus or in terms of the Prevotella bacterium that caused the cytokine shock, or in terms of the viral episode of "COVID-19" being merely the preparation for a much larger-scale joint operation, combined with a smokescreen to conceal large-scale tests of this electromagnetic weapon, for criminal ends that remain to be clarified.

RECOMMENDATIONS

The Investigation Group formally advocates the creation of a permanent "CBRN Study Group", aimed at studying biological agents and pathological electromagnetic radiation, for the purpose of giving populations the means to protect themselves from the possible widespread use of 5G technologies which, once in place and turned up to high power, would inevitably result in carnage, especially if they are combined with pathogenic injections in vaccine form and aerial spraying (chemtrails) of endocrine disruptors or viral agents.

Thus, while deaths caused by COVID-19 could have been amplified by 5G trials increasing the pathogenic potency of the virus, conversely deaths caused by a sudden power surge from 5G antennas could have been attributed to COVID-19.

After fifty days of investigation and in terms of risk study, the Investigation Group recommends that an urgent analysis by a Threat Study Group should be carried out on:

- The sociological impact of the Covid-19 pandemic on civil liberties and the economy
- The content of the mandatory vaccine under preparation, including the presence of nanotechnologies (electronic chips and population control)
- The intended abolition of physical currency and its impact on civil liberties (population chipping, which has already started in Europe)
- The impact on civil liberties and health of the widespread deployment of 5G, and the deployment and precise role of HAARP and SURA
- The precise nature of chemtrails and their objectives: heavy metals as endocrine disruptors (aluminium, barium), the spraying of ethnic viruses
- The risk of intercommunal clashes as a tool for the destruction of nations
- The risk of world war (widespread CBRN conflict).

For individuals, the Investigation Group recommends that individuals develop their autonomy (natural water point nearby, food, vegetable garden, chicken coop, beehives for those who can, essential oils, green clay, quercetin), not submit unthinkingly to a vaccine that would be proposed to us in the framework of the "pandemic" (the law prohibits treatment without the informed consent of the patient), that they keep their distance from operational 5G installations and beware of aerial spraying (chemtrails), which could resume after the lockdown: people should then not go out.

If we add to this the risk of intercommunal clashes being encouraged to destabilize and

destroy nation states for the purpose of leading people towards unelected and totalitarian global governance, as well as the **risks of CBRN conflicts**, the future situation may well require considerable vigilance and solidarity, in a spirit of brotherhood and complementarity. Certain people seem to have decided to open Pandora's box.

Educational summary and informational document for internal use

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Activist Post. Catherine Frompovich. [Chemtrail Source Material Finally Unveiled.](#)

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[Bill Gates will use microchip implants to fight coronavirus](#)

[Bill Gates Calls For National Tracking System For Coronavirus During Reddit AMA](#)

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Smithsonian Magazine: [This Spiky Patch Could Invisibly Record Vaccination History Under Skin](#)

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Mail Online: [Would YOU let your boss implant you with a microchip? Belgian firm offers to turn staff into cyborgs to replace ID cards](#).

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The Truth Seeker: [Bill Gates' Former Doctor Says Billionaire 'Refused to Vaccinate His Children'](#).

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International Union for Conservation: [Global Corruption Report](#)

[Did Bill Gates' Ted Talk In 2015 Predict The Dangers Of Coronavirus Pandemic?](#)

[Bill Gates predicted a coronavirus-type outbreak in a Netflix doc \(Picture: Netflix/Reuters\)](#) Bill Gates predicted a coronavirus-style pandemic would sweep the population in a Netflix documentary ...

Mail Online: [Bill Gates predicted a coronavirus-like outbreak - down to it starting at a Chinese market - in 2019 Netflix documentary show 'The Next Pandemic'](#).

Coronavirus Nigeria: COVID-19: [Africa May Be In Danger of 10 million Death "Bill Gate"](#).
 Video: [China's banks get cash 'quarantined' to fight coronavirus outbreak](#).
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[Thousands Of Swedes Are Inserting Microchips Under Their Skin](#)
 New American: [RFID Implants: The Benefits vs. the Dangers](#).
 Subcutaneous chips: [the ultimate danger for humanity](#) (French)
[La puce sous-cutanée pour humains](#) (*Subcutaneous chips for humans*)
[Medical info chip implanted in family's arms](#). 2002.
 Patrick Wood. *Technocracy Rising: The Trojan Horse of Global Transformation*. 2014.
 VeriChip Corporation is a subsidiary of [Applied Digital Solutions](#), the company that commercializes the Verichip.
[Trovan](#) is a European company that also commercializes subcutaneous microchips for humans.
[Prison Planet](#)
 On 11-05-2001 04:09 pm Ben Taylor (bct6853@arkansas.net) posted: The Microchip that you are making reference to is what is called a Trolley Transponder (Ltd) and operates at about 6-9 megahertz and higher! It can be directly referenced on the World Wide Web (WWW=666). I will give you the "Hyperlinks" at the end of this message! This microchip has secretly been used for about 20-30 years! US army personnel began receiving the mark in their right hand back in the early 80's, not by choice! The Marine Corp. began to utilize the Microchip heavily during the Persian Gulf War! They would generally implant the chip during Immunization! The Microchip is about the size of the tip of a #3 pencil lead and very small, some are larger! It is listed on the Military Personnel Immunization Card! Now to create a society of people who will wear this mark they must create a situation where people are required to wear "The Mark" and this situation will be for National Security purposes! Example people receiving immunization against "Anthrax, Smallpox, and many other bio-chem terrorisms! Also airports have begun using the transponders both in the cockpit and on passengers before boarding a flight!
[La micropuce implantable à l'être humain \(...\): 1ère Partie : Aperçu Général : Technique et fonctionnement](#) (*The implantable microchip for the human being: General overview: technology and functioning*)
 Etoiles.com. [La micro-puce sous cutanée](#). (*The subcutaneous chip*)
[Vers la société du contrôle total et de la surveillance permanente](#). Publié le 30 avril 2008 par bbsky network. (*Towards a totally controlled and permanently surveilled society*)
[Implants, puces et transhumains](#). (*Implants, chips and transhumans*)
 Technocracy News. [Transhuman Quest: AI Chips Implanted In Brain](#).
 L'Usine Digitale. [Mais à quoi l'implantation sous-cutanée d'une puce NFC ou RFID peut-elle bien servir ?](#) (*But what could implanting an NFC or RFID subcutaneous chip be used for?*)
[British Companies Are Implanting Microchips in Their Employees](#). It's a convenient way to deal with security, but it raises privacy concerns. 2018.
 Capital. [Ces entreprises qui implantent des puces électroniques dans leurs salaires](#). (*These businesses that are implanting electronic chips in their employees*)
 Artemisia College. [Micro-puces implantables: la menace ultime pour l'humanité](#). (*Implantable microchips: the ultimate threat to humanity*.) A point of no return for a totalitarian state. Document discusses in particular mind control (microwaves).
 Gizmodo. [Germans Deny Patent For GPS/Poison Microchip](#). Germany refuses to patent a Saudi invention of microchips that can release cyanide by remote control.
[Microchip implants: the ultimate danger for humankind](#). 2013.
[Cyanide-equipped RFID chip developed in Saudi](#) – Germany denies most evil patent ever. Germany has declined to patent a cyanide-equipped RFID chip developed in Saudi Arabia. From German publication *The Local*: A Saudi Arabian inventor has filed for a patent on a potentially lethal science fiction-style human tracking microchip, the German Patent and Trademark Office (DPMA) told *The Local* on Friday. But the macabre innovation that enables remote killing will likely be denied copyright protection. "While the application is still pending further paperwork on his part, the invention will probably be found to violate paragraph two of the German Patent Law – which does not allow inventions that transgress public order or good morals," spokeswoman Stephanie Krüger told *The Local* from Munich. The patent application – entitled "Implantation of electronic chips in the human body for the purposes of determining its geographical location" – was filed on October 30, 2007, but was only published until last week, or 18 months after submission as required by German law, she said.
[Les véritables dangers de la micro-puce RFID sous-cutanée et son fonctionnement \(données de 2013\)](#). (*The real dangers of subcutaneous chips and how it functions (data from 2013)*)
 Wikipedia. [Adrenaline is a hormone and neurotransmitter also known as epinephrine](#).
 Wikipedia. [Neurotransmitters](#). Neurotransmitters are chemical messengers that transmit a message from a nerve cell across the synapse to a target cell. The target can be another nerve

cell, or a muscle cell, or a gland cell. They are chemicals made by the nerve cell specifically to transmit the message.

[Covid-19, vaccin et 5G sont les armes de la guerre mondiale de l'ultra-élite contre les peuples...](#) (*Covid-19, vaccines and 5G are weapons of world war of the super-elite against the peoples*) Makia Freeman. The Freedom Articles. [5G Danger: 13 Reasons New Millimeter Wave Tech Will Be a Catastrophe for Humanity](#). 2019.

Wikipedia. [Clonazepam](#). Contraindications: Coma; current alcohol abuse; current drug abuse; and respiratory depression.

[Radio Shalom. Dr. Hardy](#). [Translator's note: Dr. Hardy is clearly very distressed about a decree permitting the use of Rivotril (a vasodilator) with old people in care homes suffering from problems breathing. From 29 March 2020, doctors in France were permitted to prescribe injectable Rivotrol to patients with Corona as a palliative – in other words, to patients with respiratory problems who were not going to be given treatment. But it was restricted by decree in 2011/2012 for the very reason that – in oral form, when it was given for pain control - it was known to cause respiratory failure and only certain doctors were allowed to prescribe it, with its use falling 85% thereafter. Thus, expressly permitting its use during the "Corona crisis" by decree would ensure that patients would die within 12 hours. Dr. Hardy: "I personally as a doctor, as a Jew, I am devastated." Note: [Rivotril \(clonazepam\)](#). Clonazepam belongs to the class of medications called benzodiazepines. In general, benzodiazepines are used as a sedative or to decrease seizures or anxiety. Clonazepam is used to treat seizure disorders. It helps by slowing the activity of the nerves in the brain (i.e., the central nervous system). Who should NOT take this medication? **Do not use clonazepam if you: ... have severe breathing problems.**]

RT France. [Fin du chômage partiel pour les parents qui refusent d'envoyer leurs enfants à l'école?](#) (*End of partial unemployment pay for parents who refuse to send their children to school?*). Back to school is voluntary but obligatory.

Sputnik News. [Oui, les hôpitaux ont bien procédé au «tri» des patients](#). (*Yes, the hospitals did conduct a triage of patients.*) A week after the first revelations about the recommendations of the health authorities to "strongly limit" the admission to resuscitation of the "most fragile people", the *Canard Enchaîné* (satirical magazine in France) returns to the charge after the denial of the ministry. The document in question does exist and Sputnik analysed it: it leaves little room for doubt. "In a public hospital in Ile-de-France – documents in the possession of the *Canard* attest to this – no patient over 70 years of age was admitted to the hospital during the six most critical days of the crisis. A "triage" that no one seems ready to assume responsibility for today..."

The observation made by the *Canard Enchaîné* is unmistakable. A week after its revelations about the existence of a "circular" dated 19 March that "suggested strongly limiting the admission to intensive care of the most vulnerable people", the *Canard* puts another chunk of it in its edition of April 29, in response to the denial of the Ministry of Health.

... Did Olivier Véran and his administration hope to get away with it? On the eve of the publication of this official reaction in the columns of *Figaro*, the satirical weekly wondered about the impact of this famous "circular" on a possible "worsening of the epidemic's record for older patients".

With supporting figures from the Paris Public Assistance, the author of the paper pointed out that in the space of a fortnight – starting on March 21 – the proportion of patients over 75 and over 80 in intensive care departments collapsed, going respectively from 19% to 7% and from 9% to 2%, while at the same time the epidemic "exploded in these high age groups."

Sputnik News. [Rivotril: «euthanasie hors-cadre» ou «ne pas laisser souffrir quelqu'un pleinement conscient»?](#) (*"Off-the-books euthanasia" or "not letting someone fully aware suffer?"*)

Sputnik News. [Le gouvernement a-t-il fermé l'accès des salles de réanimation aux «personnes les plus fragiles»?](#) (*Did the government close access to intensive care units to "the most vulnerable people"?*) A decree authorizing the use of Rivotril for Palliative Care in Ephads [*care homes*] and at home has prompted controversy: does it promote the euthanasia of patients with Covid-19? The ethical rules governing the use of this molecule exist, but can they still be respected in the context of an acute health crisis?

Doctissimo website. [Nigelle](#). Essential oil.

[Les bienfaits des graines de chia et comment les cuisiner](#) (*Benefits of chia seeds and how to cook them*)

Armstrong Economics. [Bill Gates has been controlling WHO](#).

[Le mécanisme de l'infection par le Covid-19](#) (*The infection mechanism of Covid-19*)

[NY ICU Whistleblower - Dr Cameron Kyle Sidell](#)

[Covid-19 : Traitement au macrolides du Dr Sabine PALIARD-FRANCO, le rapport disparu](#) (*Dr.*

Sabine Parliard-Franco's macrolides treatment – the report that disappeared

Videos explaining the mechanism of hypoxia and discussing the efficiency of different treatments by [Tadeusz Narowski](#) (French).

[Coronavirus : à l'hôpital de Vannes, l'oxygène à haut débit évite des intubations.](#) (*Coronavirus: in the Vannes Hospital, high-flow oxygen prevents intubations.*) Example of a much more effective and non-fatal therapy in Vannes, France.

[COVID-19: Attacks the 1-Beta Chain of Hemoglobin and Captures the Porphyrin to Inhibit Human Heme Metabolism](#)

SECTION FOR NON-SPECIALISTS (EVERYONE)

Silvano Trotta interviews Professeur Christian Perronne on his new book: [Y'a-t-il une erreur qu'ILS n'ont pas commise?](#) (*Is there a mistake that THEY have not made?*)

[Thierry Casasnovas](#)

[Revue Néosanté](#)

[Santé Corps Esprit](#)

[Nexus Magazine](#)

[Bill Gates Crosses the Digital Rubicon, Says 'Mass Gatherings' May Not Return Without Global Vaccine](#)

PC Magazine: [What is Contact Tracing?](#)

Call for public tenders: tear gas purchases: [Acquisition d'aérosols lacrymogènes au profit de la police nationale et de la gendarmerie nationale](#)

L'OBS. [L'Etat commande de nouveaux LBD à deux PME françaises.](#) (*The State orders new ball throwers [?] from two French small and medium-sized enterprises*) Two tenders were awarded to French SMES to provide defensive ball throwers for police defence.

The Incorrectibles. Interview with Idriss Aberkane : ["L'exécutif a du sang sur les mains" - Les Incorrectibles](#) (French) (*"The executive has blood on his hands"*)

[Shelter in Place with Shane Smith & Edward Snowden](#)

Mail Online: [Ross Clark: Neil Ferguson's lockdown predictions are so dodgy that you wouldn't even ask him what day Christmas is on](#)

Monitoring deaths in Europe: [EuroMOMO](#)

[Bill and Melinda Gates Foundation](#)

[Bill Gates: The Incredible Scam Behind His Foundation](#)

Children's Health Defense: [Here's why Bill Gates wants indemnity... Are you willing to take the risk?](#)

[Coronavirus: The Smoking Gun](#)

Edward Snowden: [Globalists rolling out Coronavirus architecture of oppression, because they fear the people](#)

Wikistrike: [Bill Gates à deux pas de la prison : le milliardaire rattrapé par ses plans diaboliques](#) (*Bill Gates a stone's throw from prison: the billionaire trapped by his diabolic plans*)

[Whitehouse petitions.](#) We Call For Investigations Into The "Bill & Melinda Gates Foundation" For Medical Malpractice & Crimes Against Humanity. Created by C.S. on April 10, 2020

[Cathy O'Brien talks about Mind control \(MK-ULTRA\)](#) Cathy O'Brien is the author of the book entitled "Trance-formation of America".

[New World Order + MK-ULTRA = Covid19?](#) (*Nouvel ordre mondial + contrôle mental = Covid 19 ?*) (English and French)

PDF. [Between Two Ages: America's Role in the Technetronic Era.](#) Zbigniew Brzezinski. Footnote on p. 28. "As one specialist noted, "By the year 2018, technology will make available to the leaders of the major nations a variety of techniques for conducting secret warfare, of which only a bare minimum of the security forces need be appraised. One nation may attack a competitor covertly by bacteriological means, thoroughly weakening the population (though with a minimum of fatalities) before taking over with its own overt armed forces. Alternatively, techniques of weather modification could be employed to produce prolonged periods of drought or storm, thereby weakening a nation's capacity and forcing it to accept the demands of the competitor" (Gordon J. F. MacDonald, *Space,* in *Toward the Year 2018*, p. 34).

Wikipedia. [Zbigniew Brzezinski.](#) Adviser to several American presidents: Carter, Reagan, Bush, Obama.

Le Monde Diplomatique. Yves Florenne. [La révolution technétronique.](#) 1971.

[Une société hautement contrôlée – Zbigniew Brzezinski.](#) (*A Highly Controlled Society*).

It remains to be seen whether we want this highly controlled society. It will certainly be much more difficult to impose in Greece, where the population – predominantly Christian – has long made the link between the "bar-code" (with the three bars 6/6/6), the "biochip 666 American Veterinary Identification Device AVID" and other "Biochip 216" (216 = 6x6x6) and the Revelation of John of Patmos, chapter 13, verse 18, on "the mark of the Beast" ...

Video. [Pharmaciens en colère ? Ils se réveillent maintenant ?](#) (*Angry pharmacists? Are they*

waking up now?)

Book: [CIA, Vaccins, Médecine militaire expérimentale & Cristaux liquides](#). (CIA, Vaccines, Experimental Military Medicine and Liquid Crystals). November 2016. Serge Monast.

Experiments and drugs tested by the CIA under the Bluebird, Artichoke, MK-Ultra and MK-Delta projects, vaccinations almost forced by propaganda followed by epidemics of all kinds, control of thought and behaviour, liquid crystal technologies – among others –, medical and military experiments, "programme of control of the Will" through visual waves (television and cinema), and through electromagnetic waves (microwave and concentrated electricity) in such a way as to cause in you a confusion of mind and a permanent lethargic state, etc.

This "dossier" will help you understand just how little you are informed (especially about "medical manipulations"). No one can deny, not only the evidence of the collapse of the economy and the global grouping of international bodies, but also, that this war is currently taking place in three distinct forms: economic war; electronic war; medical war. The Information Superhighway (e-Commerce) was established in the United States and announced by President Clinton in Washington on 26 October 1993. This programme was defined in a document as a "government control" tool – for the government – to help it achieve absolute control. This means: an "electronic record of the population" within which all businesses and individuals will be counted and perceived as "economic units". With this programme now in place, the government knows absolutely everything about you to the point that "individual freedom" and "privacy" have completely disappeared.

The introduction of this system will also allow the complete disappearance of cash since it will become, for all practical purposes, completely useless in the commercial exchanges of tomorrow. The "direct control of individuals" for political purposes, depends above all on the need to put people's minds and brains to sleep in order to paralyse them in their ability to reflect, think and react... The best of all possible worlds ... [Ironical reference to Voltaire's *Candide*] Needless to say, this dossier is totally "explosive"... A real collection of evidence and official documents proving the author's words. "Even if my life is in danger because of the dissemination of information like this, yours is even more so because of ignorance of the same information." Serge Monast

LewRockwell.com. [Did a Military Experimental Vaccine in 1918 Kill 50-100 Million People Blamed as "Spanish Flu"?](#) 15 November 2018.

Sciences Avenir. [Un tout petit peu d'ADN suffit pour faire des cristaux liquides](#). (A tiny bit of DNA is enough to make liquid crystals.) All those who seek to understand how life began on Earth, how it emerged from the primitive soup of organic molecules, will surely be captivated by these beautiful pictures, published this week in the journal Science. Not (only) for their aesthetics but because they indicate that any small fragments of DNA are capable of assembling to form liquid crystals in a solution. ...

[Les vaccins à venir... Conférence-Débat avec le Dr Guy Londechamp](#). (Upcoming vaccines ... Conference and debate with Dr. Guy Londechamp. 10 February 1996 (near Périgueux). The goal is not to scare but to raise a number of questions. There are more questions than answers! We will address three aspects:

(a) Animal experiments and transgenic breeds, (b) The likely impacts of vaccines and (c) Liquid crystals.

... There is research on what are called liquid crystals. DNA is a liquid crystal, modulable in its structure. It works like a computer. One wonders if the techniques currently developed in veterinary medicine for animal identification (subcutaneous injection of transponders = microcomputers identical to liquid crystals) would not be applied to humans! These transponders, based on an external electromagnetic influence, would make it possible to act on the cellular level - that is, unknowingly – with either transmitters, television antennas or satellites. That is, techniques of mass actions on people, with a cellular antenna that short-circuits individual consciousness. There are journalists who are very serious about the issue, particularly in Quebec and the USA. (cf. the dossier "Vaccinations, Experimental Medicine and liquid crystals" by Serge Monast, journalist, P. O. Box 177, MAGOG-Quebec. J1X3W8. Canada.) You could imagine this business of antennae on a cellular scale a bit like a microcomputer or a TV antenna, which captures information and retransmits it into images. Except this is information X.

Maybe it's science fiction. Unless science fiction is already far behind reality (the latest news of May 2002 announces the official implantation of human identification transponders, containing searchable medical data with an appropriate decoder!...)

There is indeed a multinational, (cf. Serge Monast, op. cit.) TEXAS INSTRUMENTS, which is developing transponders injected into animals that are currently used for animal identification on the entire planet. Millions and millions of transponders are already in place. We can code in it all the genetic characteristics of the animal, as well as other information we might need, such as its

vaccinations, ingested food, etc.

The Quebec journalists have associated the use of transponders and this research and work on liquid crystals.

Especially since everyone was pushed to get vaccinated against meningitis, when it was not a problem of primary importance, and a special protocol was used for that. All vaccination teams were asked to complete a very specific questionnaire containing a list of about 20 possible complications. However, this vaccine is presented as harmless in our country. But there would be a lot of possible complications with them, hence the boxes of the questionnaire to be completed and especially with regard to:

- shocks, collapse ... Everything necessary for a possible resuscitation was prepared nearby (prepared syringes) ...
- and demyelinating diseases.

If it is such an innocuous vaccination, why have these centres been asked to have such stringent conditions and these exceptional safety and observation measures?

It should also be noted that whole populations in northern Canada were forcibly vaccinated against hepatitis B without explanation, without even parental permission. There were a number of deaths among the children, but no explanation has been provided. Deliberate violations of individual liberty, bodily harm with death, but no supporting documentation for the need to do this, no explanation (cf. Médecines Nouvelles No. 77, 2nd semester 1995. p. 79/80: "HVB and MSIN Vaccinations".)

Why is there so much pressure for this vaccination, which compared to cancer, malnutrition, etc. does not seem to be a public health problem? Especially when we know that 90% of Hepatitis B patients heal spontaneously in a few weeks, that the complications affecting the remaining 10% will be felt over 10 to 30 years (chronic hepatitis and liver cancer) without being able to eliminate other factors in the responsibility of the disease. And that the Africans have a plant (desmodium ascendens) that treats all acute viral or toxic hepatitis very quickly, without any toxicity!... (a plant that is also available in France).

Given all this, the most important question arises: Are we not injecting people - with the Hepatitis B vaccine - not only the proteins of the virus capsule, but also other information, probably liquid crystals (synthetic DNA loops), enabling people to be programmed from the outside at a given time, not necessarily right away? But the device would be in place.

Jacqueline Bousquet is helpful here in reminding us that the mechanism of human cellular mitosis works thanks to the cellular centriole that is analogous to liquid crystals.

Ultimately, the problem is whether technological advances are sufficient to have an accurate knowledge of the DNA model to inject, in order to control consciousness? And it is very difficult to know exactly what is in these vaccines...

The media is already full of opinions about physical money being responsible for contagion, and suggesting using only digital currency:

Reader's Digest. [Should People Stop Using Cash in a Post-COVID-19 World?](#)

Express. [Coronavirus contagion warning: Scientists discover infection can spread through cash](#)

International Business Times. [Coronavirus Update: Can You Catch COVID-19 From Handling Cash?](#)

USA Today. [Can cash carry coronavirus? World Health Organization says use digital payments when possible](#)

It is beyond doubt that at the end of the "pandemic", decisions will be made so that money is virtual only, supported by an electronic chip, and that even the bank card along with its "contaminating" keyboard will be declared obsolete and vectors of contagion. The only possible solution is what everyone will conclude: the technology has long been prepared, and the main players (PositivelD corporation and ID2020) are not hiding it.

Wikipedia. [Microchip implant \(human\)](#) (Verichip)

[Implantable Chip Approved for Medical Records](#). FDA Clears First Implantable Microchip for Human Use. 2004

[Human Microchipping, The Benefits And Downsides](#). We need to think about who really benefits from human microchipping. 2017.

Makia Freeman. [Nanochips and Smart Dust: The Dangerous New Face of the Human Microchipping Agenda](#). 2017.

L'Express. [Verichip](#).

USA Today. [Who needs an implanted microchip when there's an app for that?](#) 2019.

Popolize22. [The true dangers of the subcutaneous microchip](#). The extreme dangers of neural chips and brainchips seem self-explanatory. Now, let's get back to the subcutaneous chips.

This new technology has multiple risks:

(A) Dangers for privacy:

(B) Dangers for liberties and human rights; danger of being spied on, tracked and repressed:

(C) Dangers for your health:

(D) Mind control dangers:

(E) Birth control danger:

(F) Danger of using the chips as a lethal weapon:

The subcutaneous microchip is a liberticide weapon of enslavement for peoples and for the individuals; it is also the result of a worldwide conspiracy and of secret projects that were prepared for us for more than 35 years!

[Population pucée : la VeriChip veut tuer l'homme](#) (*Chipped Population: the Veruichip wants to kill man*)

[Digital Angel, un espion sous la peau](#) (*Digital Angel, a spy under the skin*)

Wikipedia. [Digital Angel](#)

[Digital Angel](#). (French)

Wikipedia. [Microchip implant \(human\)](#)

Peter Koenig. [Agenda ID2020: The Diabolical Agenda within the Agenda. "Genetically Modified Humanity"](#)

[Barcode Technology and 666](#)

Wikipedia. [Microchip implant \(animal\)](#)

[AVID](#).

[Hindi] [666 BIOCHIP \(RFID, Microchip\) kun nhi lagana?](#) [*Something about "the mark of the beast"*]

[Biochip Technology - A Gigantic Innovation](#)

It will be noted that, far from merely serving as a support for a virtual currency and being able to influence the behaviour of the carrier, the subcutaneous electronic chip (like all RFID technologies) is also a locator beacon, serving to permanently locate its carrier (the grid of mobile phone antennas covering the country is already in place). This can be seen with the decision taken by France to authorize the tracing of patients' journeys and meetings during the pandemic, as China did.

Franceinfo. [Coronavirus : quatre questions sur l'exploitation des données téléphoniques pour lutter contre l'épidémie](#) (*Coronavirus: four questions about the use of telephone data to combat the epidemic*)

Mail Online. [Is there a secret Covid tracker on your phone? New feature suddenly pops up on Android and iPhone handsets - without anyone installing it](#)

Government Technology. [Kansas Uses Cellphone Location Data Tool to Track COVID-19](#)

Forbes. [COVID-19 Phone Location Tracking: Yes, It's Happening Now—Here's What You Should Know](#)

Human Rights Watch. [Mobile Location Data and Covid-19: Q&A](#). Human Rights Watch is particularly concerned about proposals for the use of mobile location data in the Covid-19 response because the data usually contains sensitive and revealing insights about people's identity, location, behaviour, associations, and activities.

Forbes. [Yes, Apple/Google COVID-19 Tracking Is Now On Your Phone—Here's The Problem](#)

Forbes. [COVID-19's New Reality—These Smartphone Apps Track Infected People Nearby](#)

Mail Online. [European network providers including Vodafone, Deutsche Telekom and Orange agree to hand over mobile phone location data to the EU to help track the spread of the coronavirus](#)

[Decree No. 2020-360 of 28 March 2020, supplementing Decree No. 2020-293 of 23 March 2020 prescribing the general measures necessary to deal with the Covid-19 epidemic in the framework of the state of health emergency \(NOR: SSAZ2008744D, published in JORF \[Journal of the French Republic\] No. 0077 on 29 March 2020, text No. 11\), which was taken on 28 March 2020 to allow any doctor to give an injection of Rivotril to elderly people "likely to be affected" by the SARS-CoV-2 virus, without the advice of another doctor, without the consent of the patient or family, and without the supervision of an examining magistrate – this being done under the pretext of an emergency situation.](#)

[Prise en charge des détresses respiratoires asphyxiques à domicile ou en EHPAD](#) (*Management of asphyxic respiratory distress at home or in EHPAD [care home]*)

[Le gouvernement de François Legault espère inciter des compagnies pharmaceutiques à s'installer dans la province en leur proposant d'accéder aux données médicales des Québécois](#) (*The Government of François Legault hopes to encourage pharmaceutical companies to settle in the province by offering them access to the medical data of the people of Quebec*)

Le Monde. [Le Kenya et le Malawi, zones test pour un carnet de vaccination injecté sous la peau](#). (*Kenya and Malawi, test zones for the under-the-skin vaccination record.*) American engineers have developed a marking and vaccination encapsulated in nanoparticles.

[Shedding light on the crisis](#): (French) Whether this virus was created in the laboratory and disseminated voluntarily or accidentally is not the point: crisis management conceals a global

plan for a hidden agenda of population control with a universal income (central banks are private and "debt" feeds these elites). People don't trust the media (in the hands of finance and properties of large groups), which is generating confusion, major researchers are speaking out... A key to understanding how deceived doctors have been and how our "elites" have done everything to promote the spread of the virus ...

Video: [Dr Gilles Besnainou : Traitement du coronavirus : la lumière au bout du tunnel.](#) (*Treating Coronavirus – light at the end of the tunnel.*)

[Confiné à vie ou nouveau monde?](#) (*Quarantined for life or new world?*) Mika Denissot.

World Economic Forum. [Covid Action Platform for Global Governance.](#)

Video: [Celeste Solum | World Economic Forum: Covid Action Platform for Global Governance - great awakening](#)

"When are we going to wake up, become aware of what is happening and organize ourselves to oppose this vaccine – not by a revolt that will only add to the chaos – but by a real inner revolution, by which we will imagine and give shape to a new world as we wish to see it? We have the power, because we are creators." (Anton Sarthès)

[Agenda 21: The Plan to Depopulate the World by 2030.](#) Lukas Magnuson. 2017.

Video: [Laura Eisenhower - Divine Union and Spiritual Oneness protect us from global threats](#)

[Coproducteur la monnaie pour changer le monde](#) (*Co-produce money to change the world*)

[\[Covid-19\] Chine, Corée du Sud, Allemagne... Comment les applications de "tracking" se déploient dans le monde](#) (*[Covid-19] China, South Korea, Germany ... How tracking applications are being deployed around the world*)

[Lésions de l'ADN, cancers du cerveau : 434 médecins et 900 professionnels de la santé belges sonnent l'alerte sur la 5G](#) (*DNA damage, brain cancer: 434 Belgian doctors and 900 health professionals sound the alert on 5G*)

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ANNEX 1

GEOPOLITICS OF THE CORONAVIRUS
Interview with Valérie Bugault



"In the middle of an unprecedented global crisis, Strategika offers you insights from analysts and thinkers recognized in their field of expertise. We asked each of them a series of questions that address different aspects of this real crisis of civilization and its political, geopolitical and social repercussions.

The first to answer us is Valérie Bugault.

Valérie Bugault is a doctor of private law from the Panthéon-Sorbonne University and a lawyer. Since 2009, she has ceased her activities as a lawyer to devote herself to disseminating the results of her extensive research work to the public. Today she is an analyst in geopolitics (economic, legal and monetary) and a lecturer. Her research subjects are institutions – national and international – currency, business, law and the functioning of the global economy.

She is the author of four books, recently published by Sigest:

- *"Du nouvel esprit des lois et de la monnaie", co-written with Jean Rémy, published in June 2017.*
- *"La nouvelle entreprise", published in July 2018*
- *"Les raisons cachées du désordre mondial", collection of articles, published on 30 March 2019.*
- *"Demain dès l'aube... Le renouveau", published in September 2019.*

Strategika. People read a lot of contradictory information from different sources or the opinions of health professionals. What do you think is the actual reality of this pandemic?

VB. As our friend Lucien Cerise says, we need to distinguish between observable reality in the real world and the narrative of the facts that is disseminated. Here is what he says, verbatim:

"In France, and more broadly in the West, the coronavirus health crisis presents a practical case of [social engineering and governance through chaos](#). We find the same structure as with the "terrorist threat": a mixture of real and fiction, combined with two well-known stratagems that are:

- 1. The **pyromaniac firefighter**.*
- 2. The [Karpman triangle](#).*

On the real/fictional mix, highlighted in his last book by Professor Raoult - who makes himself the occasional disciple of Jean Baudrillard: supporters of the "all real" are wrong, supporters of the "all fiction" are wrong.

*Example: **it is not because the "official version" of the coronavirus crisis is false that there is no epidemic**; similarly, it is not because the "official version" of the terrorist attacks is false that the attacks do not take place.*

Events take place, and it is the explanatory narrative that is false, not the events themselves.

Analysis of the current crisis also reveals the application of the techniques of the pyromaniac firefighter and the Karpman triangle, that is, the role-playing persecutor / victim / rescuer.

Power allows the crisis situation to happen, or even helps it happen, purposefully or accidentally.

In the real, power therefore occupies the place of the pyromaniac, therefore the persecutor.

Then, once the crisis has happened and is in progress, power presents itself as the rescuer, who will therefore save us from the crisis that it arranged itself.

We are facing a kind of global cognitive dissonance because we are given one or more partial (at best), contradictory and/or erroneous official explanations about the phenomena we are facing, which **prevent our understanding the whole phenomenon.**

In reality, the methodology followed in the coverage of this coronavirus crisis is similar to that generally imposed on us to guide intellectual processes: a sequencing (since the word is now fashionable) or a compartmentalization of knowledge, a kind of Fordism applied across all fields of knowledge.

To this is added another phenomenon, of partitioning and isolating populations: the medical community associates very little or not at all with other communities, each remaining in its own sphere by virtue of the way society is organized. Thus, the observations and the lives that some lead are more or less closed to the observations and the lives that others lead, their only points of contact being the (direct or indirect) way they consume.

Thus, we receive different feedback from different sources: medical professionals, international organizations, and various countries around the world. Other sources of information are inherent in the structure of our own government (decrees, laws, etc.). Still other sources of information come from so-called independent media, which partially or totally contradict the previous sources ...

In the end, in order to be able to make sense of it, all you need is to bring order to the facts of the case; that means that you need to classify and contextualize the phenomena; and of course this classification must be appropriate.

In sequence we have: the sudden appearance of a virus in China, a country that has historically experienced this type of virus.

Then, a series of alarmist news reports on the resulting carnage. Then, of course, the virus spreads around the world as we learn that the **World Bank** (which I no longer present) had planned "pandemic-specific leaps" as early as 2017.

Then a laundry list of affected countries and countless **populations locked down**, allegedly to fight the spread of the said virus.

While the "dead" pile up and hospital services literally choke under this influx of people to be detected or treated. All of this occurred in a very particular geopolitical context in which China, now a mature economic power, allied itself with Russian military power to counter the hegemony of America and company.

But what is missing from this picture is key: since the beginning of the twentieth century, the US and its allies have been governed not by what I call a political phenomenon, which represents the common interest, but **by a cartel of companies led by the main global investment banks that have had their headquarters in the City of London since the time of Oliver Cromwell.**

In reality, Western states no longer exist because they were privatized **when the control of their currencies fell into the hands of private bankers**, which explains, in Europe, the emergence of European institutions, which are only the political formalization of this capture of the rules of organization of peoples by private interests.

If one takes the trouble to take into account all of these elements, a very clear picture emerges.

In this picture, on one side a **very contagious virus appears, which becomes dangerous when it settles in the lungs and respiratory tract.**

At this stage, patients have almost no more viruses in the body and it becomes useless to apply the treatment recommended by Professor Didier Raoult, as the latter himself has stated very clearly.

Except for cases with complications, which are apparently not so rare, the said virus is relatively harmless; it gives more or less uncomfortable symptoms but is not life-threatening for the affected patients.

Didier Raoult, a French professor who is a world-renowned specialist in virology and infectious diseases, has put forward working hypotheses that have been confirmed by Chinese specialists who treated the virus and by a Senegalese professor (Prof. Seydi) who dealt with the Ebola virus and is therefore recognized as a leader in his field.

The recommended treatment is not expensive (since very old patents are now in the public domain); it is not 100% effective as this depends on whether it is administered early enough.

This is the situation in a nutshell.

On the other side of the picture, we have rent-a-doctors (the most fashionable of whom currently is the nefarious Karine Lacombe, who raves on in the media and is paid by multiple pharmaceutical lobbies), and all the state apparatus and established bodies (INSERM [*National Institute for Health and Medical Research*], etc.), all closely or distantly connected to the pharmaceutical lobbies that stepped up to the plate to trash the work of the eminent specialists I just cited.

Not to mention the fact that Macron's presidential campaign was partially funded by Big Pharma.

What's more – I'm only skimming the surface of all this, because the enumeration would really take too long – **all the current political decisions are openly contrary to the official goal of stopping the epidemic, which include classifying a decades-old, non-prescription drug as a poisonous substance in early 2020, the refusal to grant administrative authorizations to researchers offering tests to detect coronavirus infection, the refusal of help from industrialists willing to manufacture respirators, etc.**

To complete the picture, we can add the systematic dismantling of public health services, ranging from the liquidation of equipment stocks to restrictions on beds and hospital staff, which have escalated since the Sarkozy presidency. This health crisis thereby reveals the real political actors hidden behind the state's benevolent mask! **It is much easier to see now that the state is held by private interests that recommend very expensive and ineffective remedies, pending the arrival of the compulsory vaccine.**

The front-runner to win the jackpot of public and private contracts for massive orders of vaccines: Johnson & Johnson, which announced on 31 March that it will be ready to test its first vaccine as early as September 2020! Other laboratories are obviously still in the running to win the jackpot of the future vaccine.

It's crucial to understand two things, though. First, all rapidly manufactured vaccines have historically proven to be ineffective and even dangerous to human health. Second, a vaccine against a hypothetically mutated virus, such as coronavirus, is very unlikely to be effective.

This problem is compounded by the fact that Covid-19 involves several different strains, one of which is further subdivided into several variants. In conclusion, if governments wanted to actually stop the epidemic, **they would decide to treat as many people as possible in advance, and more cheaply, as recommended by Dr. Raoult and other leading specialists from all over the world.**

By this yardstick of mass preventative medical treatment, you see exactly the extent of the honesty of the French government.

In other words, if the government were honest, it would not be pursuing the current dilatory option of **blocking mass treatments by every means possible** and would follow the recommendations of Prof. Raoult; and it would not simultaneously be tightening the lockdown measures targeting the most regulated local populations while excluding rebel populations located in areas of lawlessness, and migrant camps.

The French government, which also recently massively and prematurely emptied the prisons of ordinary offenders on the recommendation of the United Nations (this was the subject of an official communiqué of professionals of the judiciary), **will punish with imprisonment anyone who repeatedly contravenes the rules** by exceeding their authorized daily walk time or by stepping beyond the perimeter of permitted walk areas, or those forgetting their home-exit permits ...

Two things are crystal clear here:

- That behind the apparent commitment to protect populations hides a duplicitous desire to engineer them into a state of shock and mass-monitor them.
- That the developing social anarchy is deliberately organized by the public authorities themselves, under the false pretext of stopping an epidemic.

Strategika. Is this pandemic going to lead to an economic and systemic collapse? More than 3 billion people across the world have been called upon to quarantine themselves. For the first time in its history, humanity seems to be able to cooperate as one in the face of a common global enemy. What do you think about this situation?

Will this pandemic force humanity to establish a global government, as Jacques Attali advocated during the influenza pandemic of 2009?

He explained that "history teaches us that humanity only evolves significantly when people are really afraid". What do you think of this idea?

VB. Information from multiple sources shows that the existence of **a pandemic was foreseen, if not expected, by certain institutions and figures**, among whom we can name, in no particular order, the Bill and Melinda Gates Foundation, the John Hopkins Centre for Health Security, the World Economic Forum, WHO, the World Bank, Jacques Attali, *The Economist* magazine (2019 and 2020) ... With the British Gordon Brown who openly calls for the constitution of a world government to deal with this coronavirus pandemic.

We are dealing globally with a situation that is unprecedented in history, in which a small group of people, hidden behind the anonymity of capital and international institutions and led by a few private bankers, **organize shocks** or take advantage of shocks in order to advance their **global agenda of taking political control of the world** by instituting a "global government".

In order to achieve this global government, it was necessary to develop ahead of time among individuals in general and among political leaders in particular a feeling that events needed to be regulated on a global scale. A pandemic is actually the phenomenon that best meets this type of need. **From the outset, manipulation can and must be suspected.**

And it is becoming increasingly obvious that this coronavirus results from the assisted combination of two natural viruses, a combination that unfortunately leaked from one or more laboratories.

We will probably never know the true course of events leading to the spread of this type of virus.

Next, given the uniformity of the political response to this health crisis by different countries, **citizen-victims absolutely must sharpen their vigilance and be on alert** because the manipulation becomes clear in the context of the widespread privatization of states.

Nevertheless, it cannot be emphasized enough that people need to be able to judge the accuracy of the information they are exposed to. For me personally, I don't think you need put the Chinese political response on the same level as the European countries' political response.

On the one hand, we must not forget that China, the current victorious opponent of the economic hegemony of the Western bloc under the aegis of NATO, was the first country attacked by this virus.

On the other hand, **Chinese leaders have publicly incriminated US GIs** in the spread of the virus on their territory.

Finally, it must be remembered that in 2019 two extremely important events occurred in the USA, which can easily be correlated:

- Some sort of serious pulmonary epidemic was blamed on the manufacturers of electronic cigarettes, and
- A laboratory (Fort Detrick) had to be closed due to leaks during the summer of 2019 (Trump has just recently ordered its reopening to fight against the coronavirus!)

We can easily imagine that responsibility for this leakage of bacteriological material, whether intentional or not (we will never know), was artificially shouldered by the powerful tobacco lobby – which enabled it to eliminate a nascent and harmless but threatening competitor (the electronic cigarette industry) - with the blessing of government bodies which thereby avoided having to answer to the public.

We must also always bear in mind that official governments are privatized but that even so, **there are many people who work in government departments on a daily basis who are not themselves corrupt**. Thus, even in case of bacteriological leakage from a secret laboratory you cannot be sure that this leakage was intentional; individuals infiltrated and under the direct orders of the financial powers may well have organized these leaks without their colleagues' knowledge.

I would like to come back to the existence of secret bacteriological research laboratories. We have to understand that the problem arises in the same terms as it has already arisen in the field of nuclear weapons: lots of countries legitimately have such laboratories without using them for offensive purposes.

Similarly, many countries had and have nuclear weapons, while very few have used them for offensive purposes.

We have long known of **the propensity of the Anglo-American powers and their affiliates to target civilian populations**, whom they see as, frankly, of absolutely no importance, rather people whom they consider superfluous to requirements (see the Georgia Guidestones, or the work of the Club of Rome and its offshoots).

To my knowledge, China has never used the nuclear bomb or any other weapon of mass destruction offensively. By contrast, the US and its affiliates no longer have evidence to provide as to their ability to use these types of weapons to target civilian populations in particular (it's become a sort of speciality of theirs).

Once these premises have been explained and the context is restored, it becomes possible to answer your first question.

Locking down healthy people brings countries' economies to a grinding halt. Depending on the length of the lockdown, these countries will find it very difficult to recover, especially when they are in debt. This recovery will obviously have to be accompanied by a revision of their internal functioning.

Moreover, the much-vaunted benefits of economic globalization, which has made each country dependent on others, are also massively given the lie by this health crisis, which exposes how the so-called developed countries have been stripped of their industry and are no longer self-sufficient in any way. Because of this we can predict with certainty that there will be a "before" and an "after" the coronavirus crisis.

We are collectively on a tightrope and **things can go either way, depending on the ability of citizens to react**, either in the direction of full globalism with world government or in that of a political takeover of countries by their nationals.

Strategika. How do you see the development of the pandemic and its political and social consequences in the weeks and months to come?

VB. Either citizens will give in to fear, or they will reflect and understand that fear is itself maintained and controlled by their leaders, who are making all the decisions that enable the coronavirus to spread not only undeterred, but easily. They are doing it by denying their populations access to treatments and drugs that are useful in containing the contamination process while they put people in lockdown long enough to be able to impose on them – this is the implementation of "voluntary serfdom" – a future miracle vaccine. This vaccine, in addition to its profitability, will undoubtedly be enhanced with aluminium salts (which has become the mandatory adjuvant), RNA messengers (which will make it possible to conduct genetic experiments on the human genome in vivo and on a large scale), and **especially RFID chips**, which will allow everyone to receive their salaries and have access to their bank

account. This stage of compulsory vaccination will be absolutely decisive in ensuring that globalists (bankers, Big Pharma and others) have direct control over populations. **Each person will thus have to obey under pain of being deprived of access to all his or her means of subsistence.** I should make it clear here that, as a result of the economic collapse, there is a great danger of the means of subsistence being ultimately not connected in any way with productive individual work but rather with a universal subsidy received from the puppet state entirely at the orders of the financial powers.

Strategika. Is there a political way out of the situation you have just described and what form could it take in your opinion?

VB. It is necessary to start from the natural principle that **each problem has a solution provided it is well defined.** In the present case, of course there are political solutions to this problem, I would even say that the only positive outcomes are political in the proper sense of the word. In other words, **only a political takeover of the organization of states by their nationals can lead to a favourable outcome for the populations.** Otherwise, we will see the general shift desired by the supranational oligarchy towards a world government in the hands of the financial powers, with **populations being destined to be sharply reduced and then the survivors enslaved.** In my work, I have explained how society could be reorganized to become truly political, that is, so that state nationals could become full participants in their country's political choices.

Just read "Institutional renewal" starting on page 278 of my book *"Les raisons cachées du désordre mondial" (The Hidden Causes of Global Disorder)*, published in March 2019 by Sigest. I won't go over this topic again here as it would take too long. Perhaps we could discuss this in a second interview for *Strategika*?

Strategika. How do you relate the current crisis to your area of expertise and field of research?

VB: This crisis is really linked to my work in many respects. I mentioned above the institutional question of the organization of states. But that is actually not the only link. The other very important link relates to current developments in the world currency. I have already explained time and time again that Brexit, which can appear to be a positive development, was initiated by the bankers of the City of London in order to have full freedom of action, free of the institutional burdens of the EU, to drive the change in world currency.

As Keynes predicted in the last century, the dollar, with its dual role of national currency and world currency, was economically unsustainable from the outset. Thus, its predictable end could be programmed.

The first step was to take it off the gold standard and the second was to delink it from oil, which replaced the gold standard. We now have front-row seats to witness this.

Currently, most countries in the world are convinced of the inanity of retaining the dollar as an international reserve currency. Trump himself is taking action since he has just taken steps to merge the Federal Reserve and the Treasury Department with the aim of creating two types of dollar on the model of the Yuan and the Renminbi: an internal dollar and a currency dollar that will circulate in international markets. The monetary reset is therefore fast approaching. A sustainable world currency, controlled of course by the bankers, will soon be able to emerge in the form of a basket of currencies, which will circulate completely digitally. It would take too long to go into detail here about the original banking scam, which consisted in identifying the currency with a tangible asset in trade (initially a precious metal). A whole story, which I tell in my book, co-written with the banker Jean Rémy, entitled *"Du nouvel esprit des lois et de la monnaie"*, (*On the New Spirit of Laws and Money*) published in June 2017 by Sigest.

I would add that the end of the dollar as an international currency is the sine qua non for a sustainable world currency, at least according to the criteria of economic and monetary functioning imposed by international bankers.

The end of the dollar world currency presupposes the end of the hegemony of the American empire.

From this it becomes easy to understand that some decision-making members of this empire have violently opposed, and still violently oppose this project, which will result in the disappearance of their dominant situations. **This part of the American leaders who are opposed can be called patriots**; these are the people who were openly involved in the domination of the world by the Americans themselves. On the other side, **these patriots have as their worst internal enemies the stateless globalists, the head of whom resides in the city of London, and who work underhandedly for the advent of a world government**, which presupposes the disappearance of the US empire. **This distinction between patriotic leaders and stateless leaders**, which is essential to a good understanding of things, also exists in China and Russia where, for example, the civilian government seems to be led by supporters of stateless globalists while **the army seems to be in the hands of patriotic leaders**, Putin making the junction between the two opposing factions.

Where China is concerned, we must bear in mind the considerable cleansing that has been taking place for years, including in the highest governing bodies, to purge the state apparatus of the elite compradores, who may be linked to stateless leaders with headquarters in the City of London.

This opposition between patriotic leaders and compradore leaders also exists in countries like Iran.

[NB. Compradore = person who acts as an agent for foreign organizations engaged in investment, trade, or economic or political exploitation.]

Thus, in this geopolitical struggle, structured around the legal issues of organizing the circuit of command, **nothing seems to me as yet to have been gained by one side or the other. Nevertheless, it is possible to predict that the victory would be crushing for the patriots, provided that the latter ally with their population and do not seek to dominate it**, as was instilled in them by their former compradore allies.

Nothing could withstand the alliance between patriotic leaders and local populations. It is precisely this alliance that the globalist powers fear. It should be noted in this regard that **the measures restricting freedom ordered by the various governments to combat the spread of the coronavirus run counter to this natural alliance that would enable the victory of the patriots over the globalists.** You can see that things are not simple ... and that, undoubtedly, this "coronavirus pandemic" happened conveniently to support the strategy of the globalists when they were in a situation of weakness ...

On the other hand, this pandemic allows hitherto unhopd-for opportunities to challenge the globalist strategy. Yet we must have the courage to seize this opportunity. I would like to conclude by saying that **the cards are currently in the hands of the civilian populations who have at last, for the first time in history, the possibility of taking their destiny back into their own hands; which means, very precisely, that they have the possibility of reinstating political governments instead of the current puppet governments that are entirely controlled by the financial powers.**

The peoples will have what they deserve: if they agree to empower themselves, in return for a little courage they will receive extremely beneficial fruits ... but will they agree? That is the question ...

I take this opportunity to pay tribute to the work of political structuring done in France by the Yellow Vest constituents, who have fully understood and anticipated this fundamental problem. Finally, natural law, so vilified by globalists, is making a comeback and order will return: either we struggle collectively to survive collectively, or we do not fight collectively and this will be the end of civilization and freedom, including the freedom to live or die."

Source: <https://strategika.fr/2020/04/15/geopolitique-du-coronavirus-entretien-avec-valerie-bugault/> Also at: Réseauinternational.net

ANNEXE 2

BILL GATES SEEKS LEGAL IMMUNITY FOR THE VACCINE

Here's why Bill Gates wants immunity from governments regarding the approval and marketing of vaccines he funds – *by Anton Sarthès*

Why do the world's largest vaccine promoters, like Paul Offit and Peter Hotez, frantically warn us about the unique and frightening dangers inherent in developing a coronavirus vaccine?

Scientists first tried to develop vaccines against coronaviruses after the SARS-CoV epidemic in 2002 in China. Teams of American and foreign scientists vaccinated animals with the four most promising vaccines. At first, the experiment seemed successful because all the animals developed a solid antibody response to the coronavirus. However, when the scientists exposed vaccinated animals to the wild virus, **the results were horrible. Vaccinated animals experienced hyperimmune responses, including inflammation throughout their bodies, ending in fatal lung infections.**

The researchers had seen this same "enhanced immune response" in human tests on failed RSV vaccination tests in the 1960s. Two children died. Offit, Hotez and even Anthony Fauci (in an unguarded moment), **warned that any new coronavirus vaccine could trigger deadly immune reactions when vaccinated people came into contact with the wild virus.**

Instead of proceeding cautiously, Fauci made the reckless choice to accelerate vaccines, partially funded by Gates, without animal studies (which could provide an early warning of uncontrolled immune response).

Gates is so concerned about the danger that he says he will not distribute his vaccines until governments agree to compensate him against prosecution. On 4 February 2020, when there were only 11 active cases of COVID19 in the United States, the administration discreetly pushed federal regulations to grant coronavirus vaccine manufacturers full immunity from liability.

[Children's Health Defense – Here's why Bill Gates wants indemnity ... Are you willing to take the risk?](#)

Do what I say, don't do what I do!

[Bill Gates' Former Doctor Says Billionaire 'Refused To Vaccinate His Children](#)

[A key to understanding how deceived doctors have been and how our "elites" have done everything to promote the spread of the virus \(French\)](#)

When are we going to wake up, become aware of what is happening and organize ourselves to oppose this vaccine – not by a revolt that will only add to the chaos – but by a real inner revolution, by which we will imagine and give shape to a new world as we wish to see it? We have the power, because we are creators.

ANNEXE 3

NIGELLA SEEDS – CHIA SEEDS

NIGELLA SEEDS
Nigella (or black cumin) seeds are edible and have medicinal properties.
Nigella seeds cleanse the body of toxins, stimulate cell regeneration, strengthen the immune system and destroy bacteria.
<p>Nigella is anti-oxidant, anti-inflammatory (in essential oil), antiallergic, antiviral, antibacterial and analgesic.</p> <p>It prevents high blood pressure.</p> <p>It is found in the form of Nigella oil, capsules and essential oil.</p> <p>Adults Take 1-3 teaspoons, pure or with honey, milk or any other food, during meals or 1 tablespoon at bedtime, for three-month cures.</p> <p>Children under 12 Half a teaspoon per day.</p> <p>Children over 12 1 teaspoon per day.</p> <p>Nigella can be mixed with fruit juices, milk, water, olive oil, etc. For example, one can consume a mixture of a tablespoon of essential oil of Nigella with a yogurt, to calm diarrhoea.</p> <p>External use Nigella oil is usually used pure, in local application and several times a day. It is also possible to integrate it with its cosmetic products. Nigella oil can also be added to boiling water before inhalation. Crushed seeds can be used in poultices, to treat certain skin problems. And it can be used to help asthma.</p> <p>Precautions for use When consumed in too large quantities, Nigella may be slightly toxic.</p> <p>Contraindications None.</p> <p>Adverse reactions None.</p> <p>Interactions with medicinal plants or supplements None.</p> <p>Drug interactions None.</p> <p>Doctor's opinion of the recognized benefits: Nigella is anti-inflammatory, analgesic, antibacterial, antifungal, antioxidant, antiviral, anti-diabetic, hypotensive, stimulating, digestive and diuretic. For whatever use, it is necessary to consult your doctor in case of persistent disorders.</p> <p>Warnings Cultivated Nigella should be used in small amounts as it is slightly toxic.</p> <p>What Is This Tiny Black Seed and What Is It Good For?</p>

CHIA SEEDS

Source of vegetable protein, chia seeds regulate the bowel. They contain 9 essential amino acids.

On contact with water, they swell and form a viscous gel. They can absorb up to 15 times their weight in water.

They are rich in fibre and promote bowel movement.

They regulate the blood pressure of people with hypertension (contribute to the prevention of cardiovascular disorders). They provide gradual energy to the body.

They contain omega-3 and omega-6 and have antioxidant properties.

Contraindications

According to the European Advisory Committee for Novel Foods and Processes, chia has an allergenic potential that has not yet been clearly determined. People who are allergic to other seeds (such as sesame or flax seeds) should therefore exercise caution because of a possible cross-allergy.

Chia is not recommended for people with prostate cancer or at risk of prostate cancer due to high levels of alpha-linolenic acid.

Drug interactions

Theoretically, the effects of chia seeds could be in addition to those of antihypertensive or anticoagulant drugs.

[What Is Chia Good For?](#)

ANNEX 4

CHILD PROTECTION ISSUES: SLIDING INTO TOTALITARIANISM?

This "technical note" produced by "The Alliance for Child Protection in Humanitarian Action" is concerning because it was published following the statement by the Executive Director of the WHO Health Emergency Programme that home visits accompanied by "screening tests" [which are deemed unreliable] designed to separate families should be carried out under the pretext of this health crisis – having the effect of removing children and thus delivering them defenceless to all appetites outside the protection of their parents.

The Investigation Group notes that the French Civil Code requires parents to protect the child in terms of safety, health and morality, and that this authority belongs to the parents and cannot be delegated to a third-party body.

It also notes that the law on which these provisions of the Civil Code are based is superior to any decree (even when promulgated under health crisis emergency measures), by virtue of the principle of the [hierarchy of norms](#).

CIVIL CODE Article 371-1

"Parental authority is a set of rights and duties, the purpose of which is the welfare of the child."

It belongs to the parents until the age of majority or emancipation of the child to protect him in his safety, health and morality, to ensure his education and allow his development, with due respect for his person.

Parental authority is exercised without physical or psychological violence.

Parents associate the child with decisions that affect him, depending on his age and degree of maturity.



Technical Note: Protection of Children during the Coronavirus Pandemic (v.1)¹

1. Child protection in the context of the coronavirus

COVID-19 can quickly change the context in which children live. Quarantine measures such as school closures and restrictions on movements disrupt children's routine and social support while also placing new stressors on parents and caregivers who may have to find new childcare options or forgo work. Stigma and discrimination related to COVID-19 may make children more vulnerable to violence and psychosocial distress. Disease control measures that do not consider the gender-specific needs and vulnerabilities of women and girls may also increase their protection risks and lead to negative coping mechanisms. Children and families who are already vulnerable due to socio-economic exclusion or those who live in overcrowded settings are particularly at risk.

From the “Technical Note”, we can see right away that children are covered by this “technical note”. And especially poor children [*socio-economic exclusion ... particularly exposed*].

"New custody solutions" are mentioned as early as page 2. [*Translator's note: not found.*]

The child is presented as a victim of new risks (*"increased risks of domestic violence, abuse, exploitation, psychological distress"*, etc.). In the face of new risks, exceptional solutions are needed ...

Measures are taking shape to transfer parental authority to social services. And then we get the whole nine yards.

On the protection of children as seen by the world elite, see the testimony of Cathy O'Brien: [Cathy O'Brien talks about Mind control](#)

2. Child Protection Response

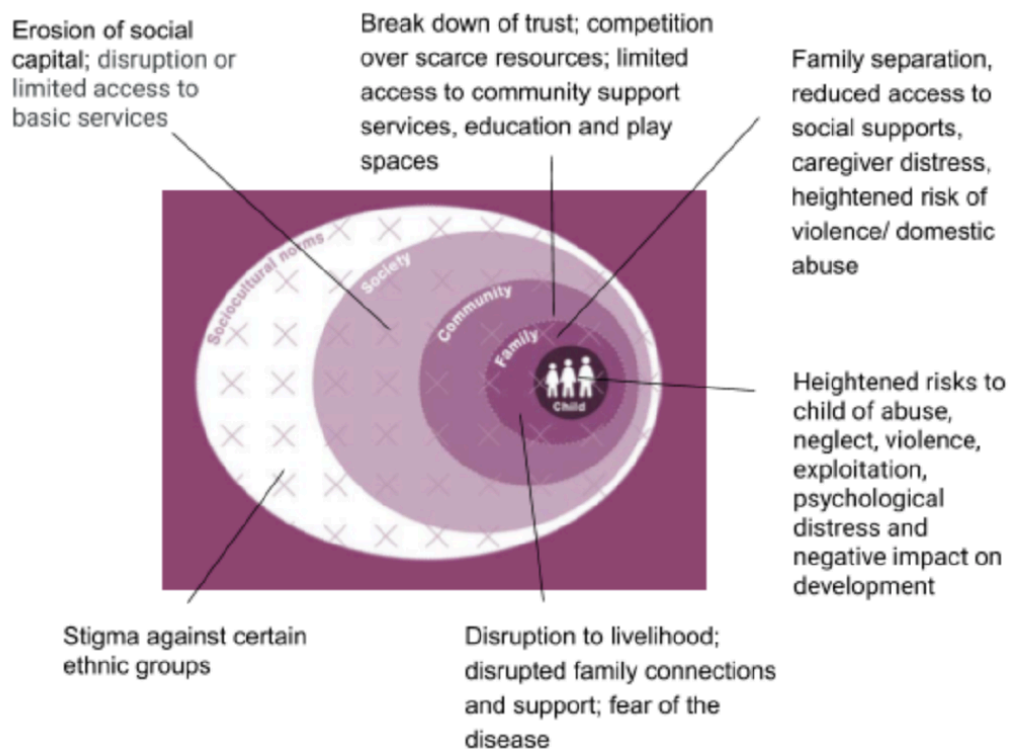
Advocacy with government, collaboration with other sectors, and child protection-specific programming are key priorities during a COVID-19 response.

2.1. Working across sectors and with governments

As highlighted in the CPMS, “the prevention of and response to [infectious disease outbreaks](#) requires close coordination and collaboration between several sectors.” A multi-sectoral response (a) ensures that children and caregivers’ needs are addressed holistically and (b) leads to better outcomes for children. Child protection actors should also consider collaborating with religious and traditional leaders.

Child Protection Risk: Gender-based violence (GBV)	
<ul style="list-style-type: none"> Increased risk of sexual exploitation of children, including sex for assistance, commercial sexual exploitation of children and forced early marriage Pressure on or lack of access to child protection/GBV services 	<ul style="list-style-type: none"> Reduced family protection of children Reduced household income and/or reliance on outsiders to transport goods and services to the community Girls’ gender-imposed household responsibilities such as caring for family members or doing chores Increased obstacles to reporting incidents and seeking medical treatment or other supports
Child Protection Risk: Mental health and psychosocial distress	
<ul style="list-style-type: none"> Distress of children due to the death, illness, or separation of a loved one or fear of disease Worsening of pre-existing mental health conditions Pressure on or lack of access to MHPSS services 	<ul style="list-style-type: none"> Increased stress levels due to isolation in treatment units or home-based quarantine Children and parents/caregivers with pre-existing mental health conditions may not be able to access usual supports or treatments Quarantine measures can create fear and panic in the community, especially in children, if they do not understand what is happening

1.1. Socio-ecological impact of COVID-19



- Support the development and roll-out of child-friendly complaints and feedback mechanisms in schools and other education facilities.

[The Alliance for Child Protection and Humanitarian Action](#)

There are several pages in the same vein, but the object of the exercise finally emerges: it is to "*support the development ... of complaint and feedback mechanisms*" to enable the removal of children.

One can understand that children can be protected by services dedicated to their safety in the event of parental failure, but it is not clear – despite the dramatic graphic – why coronavirus would transform parents to the extent that global organizations suddenly become concerned about criminalizing them for the purpose of removing their parental authority. All this seems excessive, if not abusive, and extremely dubious.

For social and judicial procedures already exist, and we do not see how it is useful to superimpose "dramatizing" directives that stigmatize parents by implying that children can be saved through collective management rather than by the care of the family. Beyond the well-worn terminology, we should recall that this extremely suspicious ideology has already been implemented, by the Nazi Party, which wanted to ensure that Aryan children received a Germanic education. Still today in Europe serious abuses are taking place in the service of a very disturbing ideology, against a background of corruption:

[Searching for the lost children](#). During the Second World War, the Nazis abducted hundreds of thousands of Polish children to become "Aryans". Roman Hrabar found 30,000 of them. (French)

[Pure Evil: The Nazis Kidnapped "German-Looking" Polish Children During World War II](#)
[Children abducted from Lidice survived the massacre](#). But were they really saved? (French)

[The Lost Children of the Lidice Massacre](#).

Enfants et purification ethnique dans la Tchécoslovaquie d'après-guerre
 Enfants volés, germanisés, victimes oubliés
 Si par miracle j'échappe à cet enfer ...
 Kidnapping d'État ou protection de l'enfance? L'angoisse des parents étrangers en Norvège
 Norway's Government-Abducted Children, And Ramifications For Europe
 France Culture. Enfants volés d'Angleterre (*England's Stolen children*)
 Royaume-Uni: le scandale des enfants retirés abusivement à leurs parents par les services sociaux. (*United Kingdom: The scandal of the children removed abusively from their parents by the social services*)
 Wikipedia. Forced adoption in the United Kingdom
 La protection de l'enfance au Royaume-Uni est un trafic légalisé qui débouche sur un crime honteux : l'adoption forcée (*Child protection in the UK is legalized trafficking leading to a shameful crime: forced adoption*)
 TV : « Les Enfants volés d'Angleterre », un scandale passé sous silence (*The Stolen Children of England: A Silent Scandal*)
 Les enfants perdus d'Angleterre (*The Lost Children of England*) The cases presented showed "social services" too easily accusing parents of abuse and permanently separating them from their children.

ARTICLE DISCUSSING THE ABUSES OF THE CHILD-PROTECTION SYSTEM, ON THE NEURO-PEDAGOGIE WEBSITE

<https://neuropedagogie.com/education/suede-et-norvege-aux-sources-de-l-enlevement-d-enfants.html>

Sweden and Norway as sources for child-removal

In Sweden and in Norway, the abduction of children by the State is encouraged by a system that entrusts them to private companies who manage the institutions, or to foster families, who see this as a source of substantial income. **Many children in these countries are still often abused**, and in the best case still retain the feeling of being guilty that they were removed from their parents. The statistics on mental illnesses developed by children in these institutions and foster families are sufficiently clear to give rise to questions as to whether they are removed for ulterior motives. In most cases, children are removed from their parents for reasons other than abuse.

The Swedish judicial system is deeply at odds with the practices of democratic countries. In social matters, the basic rules of justice are not respected, the child is invisible, the procedure is intrusive, parents are seen as the opposing party, judges are not professionals in law or social affairs, and the real power is held by **agents of social services, who often demonstrate a lack of ethics** and judgement, and lack sufficient training for the system to be otherwise. The system may rely on a wide network of people who systematically report any deviation from the new, very questionable Scandinavian standards. In this last part of the investigation, we will go to the sources of these standards, we will discover the origin of this dysfunction, which is an ideology that has the potential to spread and ravage Western Europe as a whole.

This article is the fifth and last part of the investigation into the abuses of the child-protection systems in Sweden and Norway. It cannot be understood without reading all five articles that deal with this problem. The plan of investigation is summarized here:

Part 1: Children abducted by the State in Sweden and Norway: some specific cases.

Part 2: From specific to general cases – analysis of the system's abuses.

Part 3: Foster families and institutions: abuse and business.

Part 4: Barnevernet, embodiment of the of the [Nazi Lebensborn](#) programme?

Part 5: The sources of the abuses: child-centred policies, psychoanalytic theories, strict behaviourism, action of the "gurus"

Part 5: The sources of the abuses: child-centred policies, psychoanalytic theories, strict behaviourism, action of the "gurus"

Child-centred policies

In the 1990s, Sweden pursued a policy centred no longer on the family, but on the child. Today, contrary to the claims of official representatives of the Swedish authorities, researchers have shown that the priority is no longer to ensure that children remain with their families. No serious person expects an official representative of any authority to objectively assess his or her case. This is not his or her role – it is not there that we must seek the truth.

In short, the family nowadays is no longer considered by Norway or Sweden the place of choice for raising a child. The school is a channel for the ideology of the State and applies the new educational agenda instead of offering a quality education. Even if PISA [*Programme for International Student Assessment*] is not a reliable tool for the measurement of school performance, it should be noted that Sweden is ranked 28th in the latest rankings and Norway 24th. Perhaps they spend too much time in these schools "educating" children and not enough instructing them. This is also the case in France.

It should be stressed that the nuclear family has not always been the place of choice for raising a child, including in recent history. It was the responsibility of the extended family, or in moneyed homes, tutors and servants. Even now in the countryside of Sub-Saharan Africa, this role belongs to the village. The European family structure, whether traditional or modern, is not the only model.

It should also be stressed that a child does not belong to his parents and that his parents do not give him or her life. They do not have this power. They just pass on the genetic code. And the child develops him- or herself by interpreting the stimuli of a diverse environment. S/he does not absorb faithfully or identically, and mirror neurons make no difference. In fact just like the adult, the child makes bayesian inferences and these inferences are personal. This is why children from the same family can be so different; this is why children don't do what parents or teachers expect of them and do not become a true reflection of their elders. They take from their environment what they want and there is not a single educational precept or pedagogical practice that works without fail.

But the child belongs even less to the State, and I doubt that a State is capable of loving a child in the way that even an imperfect family can, whether biological or adoptive, traditional or modern. The State is not a place of emotion, but the emotions are essential to cognition and the development of the self. **When the State intrudes in the affairs of the family to the point of recklessly removing children from their families, the State is transformed into a weapon of mass destruction of the family.** The host family, which statistically would not appear to be providing this service as an act of charity, especially given the payments provided by the State, cannot replace the adoptive, biological, traditional or modern family. In both Sweden and Norway, the use of host families is costly to the State, such that the solution that emerges is to **increasingly use institutions managed by major companies such as Argan or Wallenberg, which create temporary "orphanages", centres of education, as was done in the past, with the resulting horrors that have been**

revealed by historians. Facing the power of the State is only the individual, fragile and isolated, especially if he or she is a child.

In the second part of this investigation, by analysing the Swedish child-protection system, we learned that the State was at the centre of everything. And it is the same in Norway. The child, including 14-year-olds, had no decision-making power. **The family and child are invisible in the decision-making process.**

Therefore only the State remains.

How did we get here?

Everything started from a perverted conception of equality coupled with reductionism, peddled by sorcerers-apprentices and nurtured by psychoanalysis and behaviourism.

Pathologies of equality

It makes sense that an economic system should produce inequalities because of the actions of its agents who pursue a legitimately selfish objective, and that the State should endeavour to reduce such inequalities so that everyone can find their place, even if economically and systemically this is debatable, because the economic agents who pursue a legitimately selfish objective can also contribute, intentionally or unintentionally, to the general well-being in broader relationships.

One can of course agree that the cultural heritage that has placed men in first place in some human societies should be challenged by the State in order for women to have greater equality, as one recognizes that much remains to be done in this area.

It is agreed that any form of discrimination should be tackled by the State in the name of equality.

But equality can at no point ontologically deny or negate difference. The social laboratories of Norway and Sweden have become factories of pathologies of equality.

In the name of equality between men and women, one starts denying sexual differences that are not just physiological differences, to the point of **allowing schools to impose gender theory, when it is sexual differentiation that has enabled life to ensure the conditions of its existence**, growth, diversity and power. Equality does not mean standardization or uniformity.

In the name of adult-child equality, one starts to deny the myriad differences that separate the adult and child. A child is not an adult. He or she has neither the experience nor the knowledge of an adult, which determine decision-making. His or her brain is undergoing profound upheavals and some essential brain structures only mature at the end of adolescence. All teachers know that you don't teach a child of 15 in the same way you do a child of 3 or 10.

A child is not an adult, and the educational responses given to the child cannot be the same as those given to an adult. Thus, the child of 3 years who fills his or her glass from the tap and allows it to overflow for a few minutes is not being silly but exploring the laws of physics. It is useless to scold or spank. Not only will the child fail to understand, but we could send the message that learning the laws of physics and exploring for yourself is not a good thing. But not scolding the child does not mean allowing the water to be wasted. Explaining the impact that this could have on the finances of the family or on the ecosystem is equally unlikely to be understood. However, what we can say is that the laws of physics dictate the limits to which we are all subject and if the child does not turn off the tap, the water will continue to flow until

the well runs dry. We can also say that a 10-year-old child is able to understand the ecological and monetary arguments if they are repeated and linked to other examples than water flowing from a tap. In short, at each stage of a child's development, he or she needs an appropriate response.

A child is not the equal of an adult, and a 3-year-old child is not the equal of a 10-year-old. This does not mean that one or other should have less consideration or less weight. The lack of equality does not necessarily mean the introduction of any superiority or hierarchy, just the acknowledgement of a difference. It only means that the response must be appropriate.

Considering a 3-year-old child to be the equal of a 10-year-old or of an adult, and that the response given to one must be equal to the answer given to the other is to deny their differences, to deny the obvious, to introduce a bias of analogy.

Criminalizing parents for spanking a child on the grounds that one does not spank an adult is introducing a bias of analogy. And when we decide that, under the salutary action of the law, physical violence formerly used by bosses to discipline their employees is no longer acceptable behaviour and that therefore we should question the use of spanking with a child, we are also introducing a bias of analogy. And we are also introducing a confirmation bias, because we forget to acknowledge that violence continues to exist in the world of work. It has only changed form, being now more insidious and more psychological, including in Sweden and Norway. The threat of dismissal for an employee, or the threat for a boss of no longer having a market are also forms of violence in the world of work and cause serious psychological and physical injuries. We foster confusion by comparing the employee who was once upon a time hit by his boss with the child of today spanked by his parents.

In fact, the bosses did not spank but hit. Spanking without hurting the child is not abuse. It is a response that a young child can understand since he or she will stop wasting water and his or her physical or psychological health will not be endangered. Some children will stop wasting water. Others will defy their parents and some of these may actually not be able to control themselves, but these are likely to be children who have a problem of inhibition and this manifests in other circumstances. Spanking is obviously not an appropriate response, and that is enough for its use to be dropped. However, **criminalizing parents and taking away their child – or even imposing a financial penalty - is even less appropriate** for the parents as much as for the child. Educating parents and eliminating the factors that lead to abuse are the only possible recourse.

This bias of analogy and this pathology of equality existed already in Sweden in 1979 when the anti-spanking law was adopted, as we learn from Jean-François Held, whose article in the *Express* was reproduced on the website of the NKMR, the Nordic Committee for Human Rights. The argument was used that "we must not spank a child because we don't spank adults," or "bosses no longer hit their employees so we should not spank children" and gave birth to this law.

Let us emphasize that at the time in Sweden some intellectuals had questioned the need to pass such a law since Swedish parents were not disciplining their children by spanking them. And the supporters of the law responded that this law was not binding, but was only intended to be educational. Today, Marisol Touraine and Laurence Rossignol have taken up exactly this refrain: the law is symbolic. Then it will become binding, as in Sweden and Norway. It is the result of the process of **habituation: step by step the constraints are increased as it is argued that earlier versions were not sufficiently binding and that the people were already accepting of the idea**. The case of a child beaten by his parents will be taken to make the law more accepted: it is the process of awareness-raising. All of this is well known to psychology. And we

will pick the models that suit us, the scientific results that suit us, forgetting all the others: the confirmation bias. No scientific study has ever proven that mild spanking causes serious psychological damage in children. When such a study comes out, it is contradicted by another, and Professor Christopher Ferguson, a specialist in biases in psychology, confirmed to me in a private conversation that the meta-analysis by Professor Gershoff failed to shed any new light. The problem is, though, that the studies that “prove” what one wants to prove always get more publicity. The law is then packaged and applied.

In reality, this law could be **a first step towards the control of families by the State. The second step could be to consider that the family has no right to raise a child as it could instill ideas that are contrary to the vision of the State**, to the social consensus obtained by habituation.

[Complete fact sheet available on the UNICEF website](#)

[Additions by the translator follow. Information relating to child safety and the removal of children.

- [Safe Schools 2012: Medical Associations, medical doctors and leading scientists call for safe technologies in schools](#)
- Ireland: [Considering homeschooling this September?](#) Here's everything you need to know about the practical steps to take
- In a video entitled “[Alerte sur les enfants retirés de leur famille à cause du COVID](#)” (Warning about children removed from their family because of COVID-19), a French lady talks about job offers that have been published in Germany for people to work in quarantine camps with children with Covid. She also talks about an [article published in the German newspaper Die Welt](#), on 6 August 2020, which states that children aged 3-11 testing positive must be kept confined, along and separated from all others in the family and that if these measures are not respected, the children will be removed by force and taken to quarantine camps. She also states that this has already been done. (Corona-Quarantäne – Gesundheitsämter drohten, Kinder in Heime „abzusondern“ ([Corona-quarantine – health officials threatened to “segregate” children in homes](#)) German parents face jail if they don't confine COVID-suspected children in their own rooms
- [UK Column News on the removal of children under the Coronavirus Act 2020](#)
 - UK: [Guidance for public health officers: Potentially infectious persons](#)
 - Schedule 21 to the Coronavirus Act 2020
 - 2. Powers of a Public Health Officer under the Coronavirus Act 2020
 - PHO may direct, remove or request a constable to remove, an individual to a place suitable for screening and assessment.
 - 6.2 You may only exercise your powers with respect to screening and assessment under Paragraph 10 and imposition of requirements and restrictions under Paragraph 14, on a child in the presence of:
 - (a) an individual who has responsibility for the child; or
 - (b) if no such adult is present, **an adult that you consider to be appropriate** (such as a social worker, local authority key worker, relative or foster carer) having regards to the views of the child (Paragraph 18(4)).]

ANNEX 5

SELECTION OF REFERENCES BY POLITICAL FIGURES TO THE "NEW WORLD ORDER"

All the recent presidents of France, from Sarkozy to Macron to Holland, have called for the constitution of this "New World Order" (which is, in fact, an unelected global government serving secretive transnational groups) - Jacques Attali, close to François Mitterrand and mentor to President Macron, confirmed these intentions.

[Translator's note: the original French entries have been replaced and supplemented with a range of quotations intended to similarly indicate the current status quo.]

New World Order

The government of the Western nations, whether monarchical or republican, had passed into the invisible hands of a plutocracy, international in power and grasp. It was, I venture to suggest, this semioccult power which ... pushed the mass of the American people into the cauldron of World War I.

— [Major-General J.F.C. Fuller](#), British military historian, 1941

*We are on the verge of a global transformation. **All we need is the right major crisis**, and the nations will accept the New World Order.*

— [David Rockefeller](#)



A small pandemic will enable us to establish a global government.

— [Jacques Attali](#), 13 May 2009, close friend of President François Mitterrand and mentor to President Macron

*To achieve world government, it is necessary to **remove from the minds of men, their individualism, loyalty to family traditions, national patriotism and religious dogmas**.*

— [G. Brock Chisholm](#), co-founder of the World Federation for Mental Health, former director of UN World Health Organization

*I will not prophesise, I will merely repeat that we are at present working discreetly but with all our might, to **wrest this mysterious political force called Sovereignty, out of the clutches of the local national states** of our world. And all the time we are denying with our lips what we are doing with our hands because to impugn the sovereignty of the local national states of the world is still heresy, for which a statesman or a publicist can be, perhaps, not quite burnt at the stake but certainly ostracized and discredited. The dragon of the local Sovereign can still use its teeth and claw when it is bought to bay.*

— [Arthur Toynbee](#), member of Fabian Society, 1931

French presidents calling for the "New World Order":

[Macron Calls for a New Global Economic Order](#)

[Macron lui aussi veut un "Nouvel Ordre Mondial".... et Asselineau? 29/08/2017](#)

[President Chirac calls for "New World Order" – 2004](#)

[Sarkozy veut imposer le nouvel ordre mondial \(NWO\)](#)

[François Hollande et le nouvel ordre mondial](#)

*We are grateful to the Washington Post, the New York Times, Time Magazine and other **great publications whose directors have attended our meetings and respected their promises of discretion for almost 40 years** ... It would have been impossible for us to develop our plan for the world if we had been subjected to the lights of publicity during those years. But, the world is more sophisticated and prepared to march*

towards a world government. The supernational sovereignty of an intellectual elite and world bankers is surely preferable to the national autodetermination practiced in past centuries.

— David Rockefeller, Trilateral Commission 1991

This present window of opportunity, during which a truly peaceful and interdependent world order might be built, will not be open for too long — we are on the verge of a global transformation. All we need is the right major crisis and the nations will accept the New World Order.

— David Rockefeller, 23 Sept. 1994

By the end of this decade we will live under the first One World Government that has ever existed in the society of nations... a government with absolute authority to decide the basic issues of survival. One world government is inevitable.

— Karl Wojtyla, aka Pope John Paul II

No one will enter the New World Order unless he or she will make a pledge to worship Lucifer. No one will enter the New Age unless he will take a Luciferian Initiation.

— David Spangler, Director of UN Planetary Initiative,
a founding father of the New Age movement

Depopulation

The common enemy of humanity is man. In searching for a new enemy to unite us, we came up with the idea that pollution, the threat of global warming, water shortages, famine and the like would fit the bill. All these dangers are caused by human intervention, and it is only through changed attitudes and behavior that they can be overcome. The real enemy then, is humanity itself.

— Club of Rome, *The First Global Revolution*, 1991

... saying to them that dwell on the earth, that they should make an image to the beast ... And he had power to give life unto the image of the beast, that the image of the beast should both speak, and cause that as many as would not worship the image of the beast should be killed."

— Revelation 13:14-15

Global Sustainability requires the deliberate quest of poverty, reduced resource consumption and set levels of mortality control.

— Professor Maurice King

My three main goals would be to reduce human population to about 100 million worldwide, destroy the industrial infrastructure and see wilderness, with it's full complement of species, returning throughout the world.

— Dave Foreman, co-founder of Earth First!

Human beings, as a species, have no more value than slugs.

— John Davis, editor of *Earth First! Journal*

Humans on the Earth behave in some ways like a pathogenic micro-organism, or like the cells of a tumor.

— Sir James Lovelock, *Healing Gaia*

The Earth has cancer and the cancer is Man.

— Club of Rome, *Mankind at the Turning Point*

A cancer is an uncontrolled multiplication of cells; the population explosion is an uncontrolled multiplication of people. We must shift our efforts from the treatment of the

symptoms to the *cutting out of the cancer. The operation will demand many apparently brutal and heartless decisions.*

— Prof Paul Ehrlich, *The Population Bomb*

A reasonable estimate for an industrialized world society at the present North American material standard of living would be 1 billion. At the more frugal European standard of living, *2 to 3 billion would be possible.*

— United Nations, Global Biodiversity Assessment

A total population of 250-300 million people, a 95% decline from present levels, would be ideal.

— Ted Turner, founder of CNN and major UN donor

... the resultant ideal sustainable population is hence more than 500 million but less than one billion.

— Club of Rome, *Goals for Mankind*

One America burdens the earth much more than twenty Bangladeshes. *This is a terrible thing to say. In order to stabilize world population, we must eliminate 350,000 people per day. It is a horrible thing to say, but it's just as bad not to say it.*

— Jacques Cousteau, UNESCO Courier

The extinction of the human species may not only be inevitable but a good thing.

— Christopher Manes, *Earth First!*

The extinction of Homo Sapiens would mean survival for millions, if not billions, of Earth-dwelling species. *Phasing out the human race will solve every problem on Earth – social and environmental.*

— Ingrid Newkirk, former President of PETA

Childbearing should be a punishable crime against society, unless the parents hold a government license. All potential parents should be required to use contraceptive chemicals, the government issuing antidotes to citizens chosen for childbearing.

— David Brower, first Executive Director of the Sierra Club

Transformation of society

Democracy is not a panacea. It cannot organize everything and it is unaware of its own limits. These facts must be faced squarely. *Sacrilegious though this may sound, democracy is no longer well suited for the tasks ahead.* The complexity and the technical nature of many of today's problems do not always allow elected representatives to make competent decisions at the right time."

— Club of Rome, *The First Global Revolution*, 1991

A keen and anxious awareness is evolving to suggest that fundamental changes will have to take place in the world order and its power structures, in the distribution of wealth and income. Perhaps only a new and enlightened humanism can permit mankind to negotiate this transition.

— Club of Rome, *Mankind at the Turning Point*, 1974

In Nature organic growth proceeds according to a Master Plan, a Blueprint. Such a 'master plan' is missing from the process of growth and development of the world system. *Now is the time to draw up a master plan for sustainable growth and world development based on global allocation of all resources and a new global economic system.* Ten or twenty years from today it will probably be too late.

— Club of Rome, *Mankind at the Turning Point*, 1974

*“Effective execution of Agenda 21 will require a **profound reorientation of all human society, unlike anything the world has ever experienced** a major shift in the priorities of both governments and individuals and an unprecedented redeployment of human and financial resources. This shift will demand that a concern for the environmental consequences of every human action be integrated into individual and collective decision-making at every level.”*

— UN Agenda 21

*The goal now is a **socialist, redistributionist society**, which is nature’s proper steward and society’s only hope.*

— David Brower, founder of Friends of the Earth

*If we don’t **overthrow capitalism**, we don’t have a chance of saving the world ecologically. I think it is possible to have **an ecologically sound society under socialism**. I don’t think it is possible under capitalism.*

— Judi Bari, principal organiser of Earth First!

*Isn’t the only **hope for the planet that the industrialized civilizations collapse**? Isn’t it our responsibility to bring that about?*

— Maurice Strong, founder of the UN Environment Programme

A massive campaign must be launched to de-develop the United States. De-development means bringing our economic system into line with the realities of ecology and the world resource situation.

— Paul Ehrlich, Professor of Population Studies

The only hope for the world is to make sure there is not another United States. We can’t let other countries have the same number of cars, the amount of industrialization, we have in the US. We have to stop these Third World countries right where they are.

— Michael Oppenheimer, Environmental Defense Fund

The data doesn’t matter. We’re not basing our recommendations on the data. We’re basing them on the climate models.

— Prof. Chris Folland, Hadley Centre for Climate Prediction and Research

The models are convenient fictions that provide something very useful.

— Dr David Frame, climate modeler, Oxford University

It doesn’t matter what is true, it only matters what people believe is true.

— Paul Watson, co-founder of Greenpeace

The only way to get our society to truly change is to frighten people with the possibility of a catastrophe.

— Professor Emeritus Daniel Botkin

*We are on the verge of a global transformation. **All we need is the right major crisis...***

— David Rockefeller, Club of Rome executive member

*The concept of **national sovereignty** has been immutable, indeed a sacred principle of international relations. It is a principle which **will yield only slowly and reluctantly to the new imperatives of global environmental cooperation.***

— UN Commission on Global Governance report

There are Bishops ... who ... are subservient to the deep state, to globalism, to aligned thought, to the New World Order. ... [I]t is important that the good – who are the majority – wake up from their sluggishness and do not accept being deceived by a minority of dishonest people with unavowable purposes.

— Archbishop Viganò's letter to President Trump:
"There is an eternal struggle between good and evil"

[Worldshift 20 Declaration, 2011](#): "a whole system shift". This declaration sets out the objectives of the oligarchs' "Great Reset" engineered by the fake pandemic. The Worldshift 20 Declaration was drafted by Ervin Laszlo, founder of Club of Rome in Hungary, of Club of Budapest and of "Worldshift", the organization he created [to carry out the international projects of Club of Budapest](#).

This programme of global transformation by stealth, supported by such "luminaries" as [Deepak Chopra](#), [Bruce Lipton](#) and [Lynne McTaggart](#), is nothing less than a Maoist Cultural Revolution, comprising the smashing and remaking of humanity, society, nation states, economics, governance and religion, while the only part "the people" are supposed to play in this secret Marxist abolition of everything they have ever known and been and loved is "to choose wise leaders":

- We are called to take initiatives that until recently would have seemed unlikely, if not downright impossible. But now the world has been rearranged, the reset button has been hit. ... We must now ... partner one another through the greatest social transformation ever known.
- Current global systems of economics, governance, societal organization and ecological relationships between humanity and nature must be urgently re-designed.
- Only global thinking can accomplish these ends, but to date the lingering effects of nationalism and tribalism block real progress.
- We need to replace the obsolete notions of nation-states.
- The human community needs comprehensive structural reform.
- We need to leave everything we know behind in order to get to where we need to go.
- There must be a systemic thorough reinvention of every aspect of humanity.
- We need to redesign our societies.
- A thorough transformation of current structures and practices is required.
- Governments need to consider whether the entire concept of spirituality needs to be rearticulated in the light of a global society.
- A new bottom line must be established which incorporates the well-being of the environment and of people as part of the social bargain of society as a limited liability entity.
- ... By integrating these data over decades we get the Social Harmony Index (SHI), a composite evaluation of every society and its rating in the world. ... [This] will serve as a frame of reference for every country's development and by spurring *the rectification of deviations [emphasis added]*, enhance the impact of public opinion on the government. Every Nation should now be looking to intensify SHI competition and weaken GDP competition in the world.
- It is the responsibility of the people to choose leadership that is knowledgeable and wise.

Money

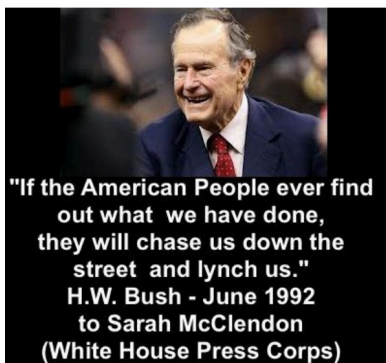
We have in this country one of the most corrupt institutions the world has ever known. I refer to the Federal Reserve Board and the Federal Reserve Banks, hereinafter called the Fed. The Fed has cheated the Government of these United States and the people of the United States out of enough money to pay the nation's debt. The depredations and iniquities of the Fed have cost enough money to pay the national debt several times over. This evil institution has impoverished and ruined the people of these United States, has bankrupted itself, and has practically bankrupted our Government. It has done this through the defects of the law under which it operates, through the

maladministration of that law by the Fed and through the corrupt practices of the moneyed vultures who control it.

Some people who think that the Federal Reserve Banks United States Government institutions. They are private monopolies which prey upon the people of these United States for the benefit of themselves and their foreign customers; foreign and domestic speculators and swindlers; and rich and predatory money lender. In that dark crew of financial pirates there are those who would cut a man's throat to get a dollar out of his pocket; there are those who send money into states to buy votes to control our legislatures; there are those who maintain International propaganda for the purpose of deceiving us into granting of new concessions which will permit them to cover up their past misdeeds and set again in motion their gigantic train of crime."

These twelve private credit monopolies were deceitfully and disloyally foisted upon this country by the bankers who came here from Europe and repaid us our hospitality by undermining our American institutions. Those bankers took money out of this Country to finance Japan in a war against Russia. They created a reign of terror in Russia with our money in order to help that war along. They instigated the separate peace between Germany and Russia, and thus drove a wedge between the allies in World War. They financed Trotsky's passage from New York to Russia so that he might assist in the destruction of the Russian Empire. They fomented and instigated the Russian revolution, and placed a large fund of American dollars at Trotsky's disposal in one of their branch banks in Sweden so that through him Russian homes might be thoroughly broken up and Russian children flung far and wide from their natural protectors. They have since begun breaking up of American homes and the dispersal of American children.

— [Congressman Louis McFadden, 1934](#)



I care not what puppet is placed upon the throne of England to rule the Empire on which the sun never sets. The man who controls Britain's money supply controls the British Empire, and I control the British money supply.

— [Mayer Amschel Rothschild \(1744-1812\) and founder of the House of Rothschild](#)

When a government is dependent upon bankers for money, they and not the leaders of the government control the situation, since the hand that gives is above the hand that takes. Money has no motherland; financiers are without patriotism and without decency; their sole object is gain.

— [Napoleon Bonaparte](#)

The best way to destroy the capitalist system is to debauch the currency.

— [Vladimir Lenin](#)

If the American people ever allow private banks to control the issue of their currency, first by inflation and then by deflation, the banks and corporations that will grow up around them will deprive the people of all property until their children wake up homeless on the continent their fathers conquered.

— [Thomas Jefferson, 1816:](#)

The few who understand the system will either be so interested in its profits or be so dependent upon its favors that there will be no opposition from that class, while on the other hand, the great body of people, mentally incapable of comprehending the tremendous advantage that capital derives from the system, will bear its burdens without complaint, and perhaps without even suspecting that the system is inimical to their interests.

— [The Rothschild brothers of London](#) writing to associates in New York, 1863.

Whoever controls the volume of money in our country is absolute master of all industry and commerce, and when you realize that the entire system is very easily controlled, one way or another, by a few powerful men at the top, you will not have to be told how periods of inflation and depression originate.

— [President James A. Garfield](#), 1881, two weeks before he was assassinated

It is well enough that people of the nation do not understand our banking and monetary system, for if they did, I believe there would be a revolution before tomorrow morning.

— [Henry Ford](#), 1863-1947

The process by which banks create money is so simple the mind is repelled. With something so important, a deeper mystery seems only decent.

— [John Kenneth Galbraith](#), Economist

The issue which has swept down the centuries and which will have to be fought sooner or later is the people versus the banks.

— [Lord Acton](#), 1834-1902, Lord Chief Justice of England

Comrades, do not be concerned about all that you hear about glasnost and perestroika and democracy in the coming years. These are primarily for outward consumption. There will be no significant internal change within the Soviet Union other than for cosmetic purposes. Our purpose is to disarm the Americans and let them fall asleep.

— [Mikhail Gorbachev](#), 2 November 1987, Member of Club of Madrid

The modern banking system manufactures money out of nothing. ... Banking was conceived in iniquity and was born in sin. ... But if you want to continue to be slaves of the banks and pay the cost of your own slavery, then let bankers continue to create money and control credit. ... Bankers own the earth. Take it away from them, but leave them the power to create money and control credit, and with a flick of a pen they will create enough to buy it back.

— [Sir Josiah Stamp](#), 1880-1941, President of the Bank of England 1928-1941, industrialist, economist, civil servant, statistician, writer and banker

Money is a new form of slavery, and distinguishable from the old simply by the fact that it is impersonal — that there is no human relationship between master and slave.

— [Leo Tolstoy](#), 1828-1910

There is no more direct way to capture control of a nation than through its credit (money) system.

— [Phillip A. Benson](#), American Bankers' Association, 8 June 1939

The issue today is the same as it has been throughout all history, whether man shall be allowed to govern himself or be ruled by a small elite.

— [Thomas Jefferson](#), 1743-1826)

The drive of the Rockefellers and their allies is to create a one world government combining Super Capitalism and Communism under the same tent, all under their control". Do I mean conspiracy? Yes I do, I am convinced there is such a plot, international in scope, generations old in planning, and incredibly evil in intent.

— [Congressman Larry P. McDonald](#), 1976, killed in the Korean Airlines 747 that was shot down by the Soviets

The high office of President has been used to foment a plot to destroy the American's freedom and before I leave office I must inform the citizen of his plight.

— [President John F. Kennedy](#), 10 days before he was murdered

"In the councils of government, we must guard against the acquisition of unwarranted influence, whether sought or unsought, by the military-industrial complex. The potential for the disastrous rise of misplaced power exists and will persist. Only an alert and knowledgeable citizenry can ... (protect democracy)

— [President Dwight Eisenhower](#) Farewell Address, 1961

War on humanity

Microwave radiation can blind you, alter your behaviour, cause genetic damage, even kill you. The risks have been hidden from you by the Pentagon, the State Department, and the electronics industry.

— Paul Brodeur, [The Zapping of America](#), 1977

Guidelines on exposure to electromagnetic radiation. Nazi scientist Herman P. Schwan worked at the [Kaiser Wilhelm Institute](#) of Anthropology, Human Heredity, and Eugenics. He was brought to the US under Operation Paperclip and employed by the US Navy. Schwan is responsible for the current "thermal-only" "safety guidelines", which take no account of the biological effects on the human body – testified to by over 31,000 studies – and which are therefore completely unprotective.

But even Schwan "consistently maintained that his dosage limit probably isn't safe for more than an hour".

— Dr. Robert O. Becker and Brian Selden, *The Body Electric: Electromagnetism and the Foundation of Life*, p.306

Compared with continuous-wave radiation, pulsed microwave fields with the same average rate of energy deposition in tissues are generally more effective in producing a biological response.

— "International" "Commission" on Non-Ionizing Radiation "Protection", [1998 "Safety" Guidelines](#)

All wireless communication devices, communicate at least in part, via pulsation and the smarter they are, the more they pulse. Pulsed EMFs are in most cases much more biologically active than are non-pulsed EMFs of the same average intensity, but pulsations are ignored in the safety guidelines despite the fact that almost all of our current exposures are highly pulsed.

— [Professor Emeritus Martin Pall](#)

[T]he scientific debate has been hijacked by corporate interests from the Telecom industry. ... the European Commission [and] most of the member states ... simply close their eyes [to] real scientific facts and early warnings. We have seen exactly the same scenario in the debate on tobacco, asbestos, climate change and pesticides.

— [Klaus Buchner and Michèle Rivasi](#), Members of the European Parliament

Irrespective of frequency, EMF radiation can be either thermal - which the human body can sense/detect, or non-thermal - which the human body cannot sense/detect. EMFs are invisible, silent, odourless and tasteless, and it is a heinous crime against humanity that today's 'safe' exposure limits are based solely on the thermal effects.

— J.G. Flynn, Weapons Expert, retired from Canadian armed forces
([Congressional Briefing by physicist Dr. Ted Litovitz, 12 July 2001](#))

If the more advanced nations of the West are strict in the enforcement of stringent exposure standards, there could be unfavourable effects on industrial output and military functions.

— [Biological Effects of Electromagnetic Radiation \(Radiowaves and Microwaves\) Eurasian Communist Countries, 1976](#) –

*Department of Defense Intelligence Document prepared by
the US Army Medical Intelligence and Information Agency and
approved by the Directorate for Scientific and Technical
Intelligence of the Defense Intelligence Agency*

In 1973—47 years ago—the World Health Organization (WHO) knew the truth about the harmful effects of microwave radiation. It published a document (Biologic Effects and Health Hazards of Microwave Radiation) [that] describes primarily the adverse effects of microwave radiation on neurological, vascular and cardiac systems, as well as on the thyroid and thrombocytes; it also reports that microwaves can cause Type II diabetes, sleep issues, cataracts, opacification of the ocular lens, and behavioural disorders, among others.

— Olga Sheean, [The WHO Cover-Up That is Costing Us the Earth](#)

5G is a weapon that will kill all biological life on this planet. It is a large basket of technologies, including autonomous vehicles, smart meters, smart cities, LED streetlights, all part of the UN “resilient cities” agenda. Testing technologies on human beings and in cityscapes is genocide, a crime against humanity in breach of the Nuremberg Code.

— [Mark Steele](#), Weapons Expert

[On HAARP] All I have to do is beam microwaves up to the ionosphere ... the microwaves going up to the cloud at a set angle will reflect down onto the country and if I continuously beam the wheat in this field, or the cattle, or the sheep, I can harm them or I can reduce the immune system of the plants so that they won't be healthy and they will die, and I can stunt their growth, and I can bring economic ruin to that country. I can harm all of the animals, all the cows, all the sheep. It's so easy to do. You only have to push a button and you can bring economic ruin to a country.

— [Barrie Trower](#), Weapons Expert

If you could ever electronically stroke the ionosphere in just the right way, which is what HAARP can do now, you can create an emotional change in a vast segment of the population, creating a lethargic sort of response or a highly energized, riotous kind of response. And it would affect a large number, maybe as many as 70 per cent of the population within the region where that signal was being generated.

— [Dr. Nick Begich](#), Author, *Angels Don't Play This HAARP*

We have declared space an operational domain for NATO.

— [London Declaration](#), Issued by the Heads of State and Government participating in the meeting of the North Atlantic Council in London, 3-4 December 2019

The exploration and use of outer space, including the Moon and other celestial bodies, shall be carried out for the benefit and in the interest of all countries, irrespective of their degree of economic or scientific development, and shall be the province of all mankind.

— [Outer Space Treaty](#) (art. 1)

We can alter the behaviour of tissues, cells, organs and whole organisms.... you can cause up to six times higher foetus mortality and birth defects in laboratory animals, and these fields are so weak you can hardly detect them ... It is known how to induce malignant diseases in human cells ... and how to cure them ...

— [Eldon Byrd](#), scientist at Naval Surface Weapons Centre, USN, on MW radiation in 1986

An entirely new arsenal of weapons, based on devices designed to introduce subliminal messages or to alter the body's psychological and data-processing

capabilities, might be used to incapacitate individuals. These weapons aim to control or alter the psyche, or to attack the various sensory and data-processing systems of the human organism. In both cases, the goal is to confuse or destroy the signals that normally keep the body in equilibrium.

— [Timothy L. Thomas](#), *The Mind Has No Firewall*,
(US Army War College, 1998)

These weapons [microwaves] are more dangerous than atomic destruction – with knowledge of the brain, we may transform, we may shape, direct roboticize man. I think the great danger of the future is that we will have roboticized human beings who are not aware that they have been roboticized.

— [Dr. José Delgado](#), 1915–2011, professor of neurophysiology, Yale University, conducted research on mind control through electrical stimulation of the brain

5G – this untested, new technology – together with previous generations – not only may threaten the life and health of our trees, plants, animals and wildlife, but also ... entirely stand in opposition to life on this planet.

— [Professor Olle Johnasson](#), Karolinska Institute, Sweden (Retired)

Our survival depends on the ability of upright scientists and other people of goodwill to break the military-industrial death grip on our policy-making institutions.

— Dr. Robert O. Becker and Brian Selden, *The Body Electric: Electromagnetism and the Foundation of Life*, p.329

5G may be like a slow Hiroshima.

[Oleg Gregoriev](#), Chairman of the Russian National Committee on Non-Ionizing Radiation Protection

What kind of world...?

- *Puts profit before people, the planet and prosperity?*
- *Rejects the kind of science that makes sense of our biology and keeps us safe?*
- *Forces young schoolchildren to be exposed to high levels of microwave radiation?*
- *Penalizes teachers for trying to protect themselves/their students from WiFi radiation?*
- *Dismisses the physical suffering of millions of global citizens with microwave sickness?*
- *Has governments that refuse to acknowledge or talk to their constituents about the wireless technology deployed without their consent and without limits, monitoring or control?*
- *Employs industry-biased/-funded 'experts' to downplay the dangers of wireless technology?*
- *Fails to advise the public of the dangers identified by the telecoms industry itself?*

What kind of World Health Organization condones worldwide harm in favour of industry?

— Olga Sheean, [World Health Organization: Setting the Standard for a Wireless World of Harm](#)

The exponential rise in public exposure to electromagnetic radiation is putting the future of humanity at great risk. History shows that from the very beginning the UN and its sister organizations have been ideologically and financially driven by the same interests who have taken control and monopolized our fundamental needs without a care for life on Earth. This violates everything the UN supposedly stands for and the spirit of the treaties emanating from the organization as understood by the public. The UN is indistinguishable from Orwell's Big Brother.

— [Planetary Association for Clean Energy](#), submission to United Nations Human Rights Council, 2019

ANNEX 6

A MESSAGE ON THE REMOVAL OF CHILDREN

"Conspiracy theory? True or false? I don't know, but given the uncertainty, I won't send my son back to school.

"Please read this and pass on the message quickly, especially to families with children in school ...

"You will not be contaminated nor exterminated by the virus but by the future multi-dose vaccine. DON'T ALLOW YOURSELF TO BE TESTED

"COVID-19 means: Certificate of Vaccination IDentity with 19 1=A and 9 = I for AI = Artificial Intelligence.

That's not the name of the virus. It is a major international programme of enslavement and population reduction developed for decades and launched in January 2020 during the last Davos [*World Economic Forum meeting*].

"Under this condition, DO NOT ALLOW YOURSELF TO BE TESTED, after 70 days, the virus is inactive. We are already beyond this point.

"What reactivates the virus is an immune system weakened by vaccination. What they intend to inject us with (7 vaccines, all of them horrific) is a real descent into hell aimed at mass depopulation to the tune of over 80%. Added to that is 5G, which they are installing in every city in the world to weaken our immune defences. That's the real bomb in our human body!

"Don't get tested – the tests are worthless.

The test manufacturers say that none of the tests can detect SARS-Cov-2 virus, but only a tiny portion of small harmless viruses or cell waste (exosomes) that are naturally part of our microbiota.*

So these tests only serve only to prove that you are not sick, just a healthy carrier, but not for them – they will declare that you are positive! Therefore sick ...

"More and more people tested will appear positive on the tests, approaching 90%. That's their goal!

"This is why they are picking on our children first because they cannot impose the test on adults in a democracy.

But **as of 11 May in France, they will impose mass testing in all schools** (700,000 per week).

Each school principal will receive a 61-page order from the board of education (*talk about drowning the issue with a tsunami of words*) and **impose the test without informing the parents beforehand**, as this will be imposed by the State (also in all institutions but in a second step: businesses or community work orders as a result of mass unemployment, etc.)

"Once they have tested your child, they will force all close family and contacts to be tested, requarantined (then vaccinated).

You will have no choice but to accept this testing, otherwise they will keep your child – this will appear between the lines in this order sent to each school. We are not sick, just healthy carriers ... carriers of lots of small viruses that will appear on the tests as a positive result – this is their control strategy ... this is their final solution!

The only thing they need is this: "*To make the whole world believe that the world is sick.*

"BUT THEY DO NOT HAVE THE KEY, at least not yet. They know that we will not remain passive, which is why they have set up this secret, diabolical and strategic plan: **GETTING TO US THROUGH OUR CHILDREN.**

Their point of attack: our children.

Their strategy: testing.

Let's not give them what they want!

Let's not let them control us.

To be tested positive is to be labelled vermin like the Jews were.

"Refusing testing is the only key to prevent them from imposing vaccination on us (second wave), it's how we can prevent them inflating the figures and IMPOSING global vaccination on 7 billion people in the third wave.

They cannot impose the vaccine on us because we are not yet in a dictatorship – that is what they are aiming for, once vaccinated we will all be sick, weakened ... and the rest you know ...

In France, people can refuse mass testing.

That's why the only message that should be sent on all social networks and throughout France is the following one. During these 9 days we should only watch and talk about the following (leave your books and stop watching videos dealing with other matters).

This is a global emergency call to save all the lands that have not yet been taken over by total corruption or dictatorship.

This is the most important message to pass on during these 9 days – we must only talk about this:

DO NOT BE TESTED AND DO NOT ALLOW YOUR CHILDREN TO BE TESTED WITHOUT YOUR CONSENT

"If people in France understand this message, they will not send their children back to school, into the clutches of the State.

They won't be mass-tested.

And they won't be forced to get vaccinated during the second wave.

The only way to save our humanity is to make people who still have the choice understand: don't be tested, don't give them the response they want, don't fall into their trap.

EVERYTHING will flow from there.

NOT cornered - NOT tested - NOT vaccinated.

"We must fill Facebook, videos and all media with this single message.

MAKE YOUR MESSAGES CLEAR.

Their point of attack: your children.

Their strategy: testing.

Let's not give them what they want."

** [Translator's note: the last part of this assertion was actually made not by the manufacturers, but by Dr. Andrew Kaufman, among others.]*

Peter Koenig. [The Farce and Diabolical Agenda of A "Universal Lockdown"](#)
[World Economic Forum: COVID-19 Platform](#)

ANNEX 7

MULTISYSTEM INFLAMMATORY SYNDROME IN CHILDREN (MIS-C)

Following new information concerning children hospitalized for inflammatory symptoms (clinically similar to Kawasaki disease) and the possible link between this syndrome and COVID-19:*

[The translator has replaced the original French article exclusively dealing with Kawasaki disease with excerpts from a more recent article (August 2020) on multisystem inflammatory syndrome in children (MIS-C), which is available in English and provides an overview of developments since original publication of the French version of the present report in May 2020. The full article is available in pre-print PDF version [here](#).]*

Multisystem Inflammatory Syndrome in Children (MIS-C) Associated with SARS-CoV-2: A Systematic Review

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Abstract

Objective

To develop a more comprehensive description of multisystem inflammatory syndrome in children (MIS-C), a novel syndrome linked to SARS-CoV-2, by conducting a systematic analysis of studies from different settings which used various inclusion criteria.

Study design

MIS-C studies were identified by searching PubMed and Embase as well as preprint repositories and article references to identify studies of MIS-C cases published from April 25, 2020 through June 29, 2020. MIS-C study metadata were assessed and information on case demographics, clinical symptoms, laboratory measurements, treatments, and outcomes were summarized and contrasted between studies.

Results

Eight studies were identified representing a total of 440 MIS-C cases. Inclusion criteria varied by study: three studies selected patients diagnosed with Kawasaki disease (KD), two required cardiovascular involvement, and three had broader multisystem inclusion criteria. Median age of patients by study ranged from 7.3 to 10 years, and 59% of patients were male. Across all studies, the proportion of patients with positive results for SARS-CoV-2 RT-PCR tests ranged from 13 to 69% and for serology, from 75 to 100%. MIS-C patients had high prevalence of gastrointestinal (87%), dermatologic/mucocutaneous (73%), and cardiovascular (71%) symptoms. Prevalence of cardiovascular, neurologic, and respiratory system involvement significantly differed by study inclusion criteria. All studies reported elevated C-reactive protein, interleukin-6, and fibrinogen levels for at least 75% of patients in each study.

Conclusions

This systematic review of MIS-C studies assists with understanding this newly identified syndrome and may be useful in developing a refined, universal case definition of MIS-C.

The World Health Organization (WHO) was first notified of a cluster of unexplained pneumonia cases in Wuhan, China, on December 31, 2019. Over the first six months of 2020, coronavirus disease 2019 (COVID-19) became a global pandemic with over 10 million confirmed cases and over 500,000 deaths by the end of June.⁽¹⁾ Although the causative agent of COVID-19 – severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) – has proven difficult to contain, infection in children and adolescents has generally resulted in more mild or asymptomatic cases compared with adults.^(2,3,4)

On April 25, 2020, the United Kingdom's National Health Service (UK NHS) alerted physicians of a newly recognized syndrome with severe multisystem inflammation in children with clinical features similar to those found in Kawasaki disease and toxic shock syndrome (TSS).⁽⁵⁾ The new syndrome was temporally associated with COVID-19, with the development of symptoms typically about 3-4 weeks after escalation of geographically local COVID-19 incidence. Subsequent reports from other European countries and the United States (US) identified additional cases of children exhibiting a hyperinflammatory syndrome with multisystem involvement; many of the patients had laboratory confirmation of current or previous SARS-CoV-2 infection through reverse transcriptase-polymerase chain reaction (RT-PCR) or serological tests.⁽⁶⁾ The first published study of MIS-C-patients described eight children from the UK with hyperinflammatory shock;⁽⁷⁾ since then, several additional descriptive studies have contributed a wider breadth of knowledge about the clinical picture for the syndrome, now referred to as multisystem inflammatory syndrome in children (MIS-C).^(8,9,10)

Health officials have adjusted the clinical and epidemiologic criteria used to identify cases as the understanding of MIS-C has evolved. MIS-C is a novel syndrome for which no confirmatory diagnostic test exists. Clinical practice, including diagnostic criteria, for MIS-C have varied across time and setting. Therefore, studies of MIS-C may substantially differ in case inclusion criteria, laboratory values tested, and treatments administered. The purpose of this systematic review is to compare and summarize currently published studies to provide an overview of the clinical picture of MIS-C that accounts for these different settings and case inclusion criteria from different settings.

Methods

Literature searches were conducted using PubMed and Embase for papers published from April 25, 2020 through June 29, 2020. Given the novelty of MIS-C, preprint manuscripts uploaded to medRxiv and bioRxiv servers during the same timeframe were also searched. Due to the rapidly evolving understanding of MIS-C, a variety of search terms were utilized to identify reports of MIS-C cases. The search terms included the following phrases or combinations of phrases “multisystem inflammatory syndrome”; “kawasaki disease”; “hyperinflammatory”; “hyperinflammation”; “toxic shock syndrome”; “shock” with “children” or “pediatric”; “cytokine” with “children” or “pediatric”; “inflammation” or “inflammatory” with “syndrome” and “children” or “pediatric.”

Studies on MIS-C cases have used different names for the syndrome and used different criteria to identify cases. To ensure that no studies were missed through keyword searches, Google Scholar was used to search through any studies that cited two early, impactful publications on MIS-C.^(7,10)

Papers identified through all searches were examined to determine if they were studies describing patients with clinical and epidemiologic characteristics consistent with MIS-C as defined by the UK Royal College of Paediatrics and Child Health (RCPCH), New York State Department of Health, the US Centers for Disease Control and Prevention (CDC),⁽¹¹⁾ or the WHO.⁽¹²⁾ Studies describing patients fitting the following criteria were included in the analysis: 1) young age (typically under 21 years old); 2) severe cardiovascular or multisystem clinical manifestations; 3) laboratory evidence of inflammation; 4) either laboratory evidence of

SARS-CoV-2 infection or epidemiological association with COVID-19 (including temporal association with periods of high local COVID-19 transmission). Additionally, given the substantial clinical overlap between MIS-C and KD, another syndrome without a diagnostic test, studies describing KD patients with laboratory or epidemiologic links to SARS-CoV-2 were included in this systematic review.

Only studies that described at least 5 MIS-C cases were included, and studies with MIS-C patients largely or entirely described in other publications were excluded. We used information on setting (dates of case identification and healthcare setting) to identify potential duplication of patients between studies, following up with study authors for additional information. Data collected from the papers included: case inclusion criteria, demographic information, clinical signs/symptoms and outcomes, laboratory markers of inflammation and cardiovascular function, and treatments administered. Studies that did not sufficiently describe the above data were excluded. Median and interquartile range (IQR) for laboratory values were captured if reported by each study, along with the proportion of patients with abnormal values using reference ranges reported for each study. For studies that reported median and IQR but not the proportion with abnormal values, the range of possible proportions was reported based on which percentile values fell outside reference ranges (For example, if the reported 25th percentile was within the reference range but the median was above it, we know that between 50-75% of patients in the study had elevated values for that marker).

Studies were divided into three categories based on inclusion criteria; studies with cardiovascular involvement as a requirement for inclusion; patients meeting KD clinical case definition(13) as a requirement for inclusion; and broader criteria that captured patients with multisystem involvement along with evidence of inflammation and links to COVID-19. Generalized linear mixed models with double arcsine-transformed proportions(14) were used to assess differences in prevalence of clinical symptoms and treatments administered by study category. The mixed model approach allowed for the comparison of proportions by inclusion criteria while accounting for study heterogeneity.(15)

Statistical analyses were performed using R version 4.0.2 (The R Foundation for Statistical Computing, 2020).

Discussion

Our review summarizes and compares data from eight separate studies that describe patients with MIS-C identified in various settings using different inclusion criteria. MIS-C patients predominantly had fever with gastrointestinal, cardiovascular, and mucocutaneous manifestations which was consistent across studies despite the different inclusion criteria. Respiratory manifestations, which are predominant manifestations in COVID-19, were described in a minority of MIS-C patients. All studies reported highly elevated levels of C-reactive protein and other laboratory markers of inflammation suggesting that hyperinflammatory state is a primary hallmark of MIS-C. The studies represent an evolving understanding of the clinical manifestations and management of this novel condition. Because the UK NHS's initial alert described cases similar to atypical KD or toxic shock syndrome, the early published studies focused their analyses either on patients diagnosed with KD or patients with shock and other cardiovascular disorders.(7, 8, 10, 31) Many of the more recently published studies allowed for the inclusion of patients with more encompassing multisystem involvement along with laboratory evidence of inflammation.(21, 22, 32)

The studies describing patients diagnosed as KD or with required cardiovascular inclusion criteria most likely represent subsets of MIS-C as defined by the broader case definitions used by the UK, New York State, CDC, and WHO. The patients described by Riphagen et al all had multisystem involvement, laboratory evidence of inflammation, and positive serological tests for SARS-CoV-2, and they all would have met the above case definitions.(7) Similarly, the patients in other studies(8, 10, 28, 29, 31) also overwhelmingly had multisystem involvement,

laboratory evidence of inflammation, and positive tests for SARS-CoV-2. Conversely, substantial proportions of patients in the studies with broader case definitions would have met inclusion criteria for the other studies: many patients in other cohorts(21, 22, 32) received diagnoses of KD (22%, 36%, and 40%, respectively) or had evidence of shock (50%, 10%, and 48%, respectively).

Importantly, although many MIS-C cases share clinical features similar to KD, increasing evidence suggests that they are two separate syndromes. Although MIS-C and KD present with some phenotypic similarities, there are several epidemiological and clinical features distinguishing the two diseases. Approximately 80% of KD cases are under 5 years old with a median age of 2 years(34, 35) and the median age for patients reported in all eight MIS-C studies was at least 7 years. KD incidence is dramatically higher among Japanese children and other children of East Asian descent. In contrast, the MIS-C studies do not describe a preponderance among children of East Asian descent, and despite extensive spread of COVID-19 in some East Asian countries, reports of MIS-C in that region are largely absent.(35) Verdoni et al reported that patients meeting KD diagnostic criteria associated with COVID-19 had lower white blood cell count and lower platelet levels but higher levels of C-reactive protein and ferritin compared with cases of KD from before the COVID-19 pandemic.(10) Whittaker et al reported that MIS-C cases had higher levels of neutrophils, C-reactive protein, ferritin, troponin, and d-dimers compared with a historic KD cohort, but lower levels of lymphocytes and platelets.(32) MIS-C cases exhibit higher prevalence of multisystem involvement, notably cardiac abnormalities such as myocarditis and shock.(35) KD is a clinically diagnosed syndrome, thus given overlap in clinical features with MIS-C, a substantial proportion of MIS-C cases may continue to be classified as KD as more children are exposed to SARS-CoV-2. Early reports support the use of IVIG, which is the standard treatment for KD, for use in treating MIS-C patients;(7,9,23) corticosteroids also have an important role in KD treatment and the same may prove true for MIS-C.(19) Despite this, there may be key etiological and pathophysiologic differences between KD and MIS-C, and distinguishing the two syndromes may be important for establishing best practices for MIS-C treatment and prevention.

In all studies, the proportion of patients with positive SARS-CoV-2 serology testing was substantially higher than of those with positive SARS-CoV-2 RT-PCR tests. These findings as well as increased markers of hyperinflammation are consistent with the hypothesis that MIS-C results from a post-infectious inflammatory process.(21, 35, 36) Multiple reports(21, 22, 37) describe a 4-6 week delay between the proliferation of local COVID-19 cases and the surge in MIS-C cases, whereas Feldstein et al describe a median of 22 days between onset of COVID-19 symptoms and MIS-C hospitalization.(22) In the study with the highest prevalence of RT-PCR positivity (69%)(28), the authors noted that the viral load reported by cycle threshold was low in almost all patients and that all patients with serological assessments were IgG positive, suggesting a substantial delay between the timing of SARS-CoV-2 infection and onset of MIS-C symptoms and subsequent RT-PCR testing. One interesting note is that the two large studies with the broader inclusion criteria ((21,22) had relatively large proportions of patients who tested positive by PCR (51% and 40%, respectively); they also had higher proportions of patients with respiratory symptoms (40% and 70%, respectively). The inclusion criteria for these studies may have captured a greater number of cases with severe acute COVID-19, and the etiology of those cases may be different from that of post-infectious MIS-C cases.

Fifty-nine percent of MIS-C patients across all studies were male. All but one study reported at least 50% of patients as males. In contrast, boys represent just under 50% of all laboratory-confirmed COVID-19 cases under 20 years in both the US and the UK.(38,39) This suggests that males infected with SARS-CoV-2 may be more likely to develop MIS-C, similar to KD in which studies have reported a male to female ratio of ~1.5 to 1 across many countries.(40)

Certain racial and ethnic groups may also be disproportionately affected by MIS-C. The proportions of Hispanic patients in the Dufort et al and Feldstein et al studies (36% and 39%) are higher than the proportions of all Hispanic residents in New York state and in the entire US

(19.3% and 18.5% respectively).^(21, 22) ⁽⁴¹⁾ However, the proportion of MIS-C patients of Hispanic origin may not differ substantially from the proportion Hispanic reported in SARS-CoV-2 seroprevalence surveys among adults in several areas of New York State (36.6%)⁽⁴²⁾ and the proportion of US COVID-19 cases that are Hispanic (33.4%).^(41, 43) Conversely, the proportions of MIS-C patients reported as black or Afro-Caribbean may be higher than proportions in both the underlying populations and in reported COVID-19 cases. The proportion of black patients in the Feldstein et al study (31%) is higher than the proportions of black residents in the US (13.4%) and the proportion of all US COVID-19 patients who are black (16%).⁽²²⁾ ⁽⁴¹⁾ ^(43, 44) Similarly, the proportion of black patients in the Dufort et al study (40%) is higher than the proportions of black residents in New York State (17.6%) and in SARS-CoV-2 seroprevalence surveys among adults in several areas in New York State (20.2%).⁽²¹⁾ ⁽⁴¹⁾ ⁽⁴²⁾ The proportion of MIS-C patients who are black (38% and 40%) or Asian (31% and 40%) in the two studies from the UK^(29, 32) (specifically, England) are higher than the proportions of Black or Asian residents in England (3.5% and 8.0%, respectively)⁽⁴⁵⁾ and Black and Asian proportions of all English COVID-19 cases (4.6% and 9.6%, respectively). Although the exact cause of these disparities may be unknown, conditions in the places where people live, learn, work, and play affect a wide range of health risks and outcomes.⁽⁴⁶⁾ The link between social determinants of health, including social, economic, and environmental conditions, and health outcomes is widely recognized in the public health literature. Moreover, it is increasingly recognized that inequitable distribution of these conditions across various populations is a significant contributor to persistent and pervasive health disparities.⁽⁴⁷⁾ Factors affecting disadvantaged groups such as living in more crowded conditions, employment in occupations not suitable to physical distancing, higher prevalence of underlying medical conditions, and reduced healthcare access have been implicated in the greater incidence and severity of COVID-19 observed in racial/ethnic minorities.^(48, 49) Addressing social determinants of health that disproportionately affect certain racial/ethnic groups, while improving access to health care, is crucial to reducing the additional burden of MIS-C.

This study has several important limitations. Data for some variables of interest were either not reported for all studies or not reported in a consistent fashion, making direct comparisons between studies difficult. Potential issues included: different criteria available to assess organ system involvement, lack of information on imaging studies, timing of laboratory tests, and different thresholds for defining abnormal laboratory values. Overall proportions for variables of interest were calculated by excluding studies which did not report those variables. It is possible that those variables were excluded from these studies due to their involvement being less prominent. Additionally, the lack of a diagnostic test or universally used case inclusion criteria could have led to missed diagnosis or nonreporting of some MIS-C cases, particularly patients without a positive SARS-CoV-2 test and patients with less severe symptoms. Exclusion of those patients may lead to an incomplete picture of the overall spectrum of disease, and further investigations would help to expand upon this preliminary characterization of MIS-C. Finally, although most patients improved with treatment or by supportive care alone,⁽³²⁾ these descriptive studies are not sufficient for assessing the efficacy of different treatments. Efforts to better investigate treatments are currently under way,⁽⁵⁰⁾ and ultimately clinical trials will be necessary to determine optimal clinical management of MIS-C patients.

Data from the systematic review indicate that MIS-C cases from different studies across different countries have similar manifestations with a strong temporal, geographic, and laboratory link with SARS-CoV-2 infection. Clinical, laboratory and epidemiologic characteristics of MIS-C appear to be different from those of KD. Future studies will hopefully shed additional light on MIS-C and improve prospects for prevention and treatment of this severe pediatric condition.

ANNEX 8

COMMUNICATION TYPICAL OF A TOTALITARIAN STATE "THE TOTALITARIAN VIRUS" EXTRACT FROM A BLOG

"This is what I think 1000%. This post is neither conspiracy theoretical, partisan, nor polemical. It is simply intended to generate some critical thinking (for those who are still equipped to do so!)

Edouard Philippe, the Prime Minister *[of France]*, announced on Saturday that there is a "serious risk" of a "second wave", potentially more deadly than the first: "The risk of a second wave, which would hit an already weakened hospital system, impose another lockdown, ruin the efforts and sacrifices made [...], is a serious risk," he said during the presentation of the de-lockdown plan starting on 11 May.

At the same time, Professor Didier Raoult, a specialist in epidemics, was saying the exact opposite: "The second wave is science fiction." When, as a "basic" citizen, you are thus pin-balled by contradictory information, without any way of knowing who is telling the truth, it is a sign that you are in danger, according to the philosopher Hannah Arendt, a survivor of Nazism and a specialist in totalitarian systems.

How truth is sacrificed, according to [Hannah Arendt](#), totalitarian regimes take "total" power over individuals by showering them with contradictory information until they have no way of knowing where the truth is. Under Hitler, under Stalin, she explains, the citizen never knew what fate had in store for them. Government propaganda did not consist of simply lying to the citizens, telling them improbable fairy stories that could easily have been unravelled. No, it was much more subtle and effective than that. To really prevent any debate, to get citizens to be totally discouraged, to stop trying to understand, to think, and therefore to lose all means of action and to resist, the state media deluged them continuously with a flood of contradictory information, mixing the true and the false until no one could know what to think:

"We're winning the war!"

"We're losing the war!"

"Rations are going to be increased!"

"Rations are going to be reduced!"

"The economy is growing!"

"You'll have to work harder!"

"You can go out without permission!"

"Controls are going to be strengthened!"

To add to the confusion, the authorities were no longer speaking with one voice, but on the contrary through a crowd of spokespersons, and it was impossible to know who was speaking the "true" word of the State.

This is exactly what we are experiencing today, and that is why such minds are in such stress. It's normal. It is not your fault if you do not understand anything, if you are caught between friends, neighbours, journalists, bloggers or even "YouTubers" who each has their opinion that seems valid, while being incompatible with each other. It is the logical result of government communication that introduces confusion and contradictions everywhere. Because, if you are honest, for several weeks now you have had no way of knowing what to reasonably think of the situation.

When President Macron announces de-lockdown as of 11 May, it is immediately followed by a statement from his Prime Minister that the de-lockdown will only affect certain people, in certain areas. At the same time, Prof. Jean-François Delfraissy, President of the Scientific Council for Covid-19 and therefore Principal Advisor to the Elysée, says that the elderly will remain locked down until the end of the year, which is quickly denied by the Minister of the Interior, Castaner. Government spokeswoman Sibeth Ndiaye then explains that, although the de-lockdown is starting on 11 May, you would do well not to plan not to go on holiday in August, which is contradictory. Immediately, an expert virologist (Anne Goffard) announces on *France-Inter* that several modelling studies in different countries conclude that "a second epidemic wave

is very likely, at the earliest by the end of August", unless it is "in October or November". So we understand that the de-lockdown is only partial and will probably be followed by a re-lockdown, but then we do not understand why we are de-lockdowning if it is to prepare for a second disaster. Yet the confusion is only just beginning.

For his part, the Minister of Education, Jean-Michel Blanquer, is in the middle of announcing the reopening of "all schools in all areas", specifying immediately that children are probably major vectors of the virus and that it will probably be necessary to leave colleges, high schools and higher education closed. Labour Minister, Muriel Pénicaud, then opines on *France-Info* that it is "reasonable to say that general teleworking will take place at least until the summer", which is the last nail in the coffin of the announcement of a de-lockdown on 11 May.

I won't go into the publication of a map of the red, orange and green *départements* [administrative areas of France] which, we are told, may or may not be useful in defining the different dates of opening of the different sectors of the economy; the contradictory announcements of the benefits of lockdowns, masks and screening tests; the chloroquine affair reaching an all-time-low of rough-and-tumble, with equally unassailable experts arguing for, or totally against, treatments; the fact that children and young people are successively presented as potential victims of the disease or on the contrary perfectly protected. If you have a headache at the end of all this and want to go out for a walk to think about something else, remind yourself that this is exactly the [effect sought by the authorities of totalitarian countries](#) when they overwhelm their citizens with a flood of Information, counter-Information, re-information: the aim is to ensure that the networks of resistance are divided. That the citizens lose heart. That criticism becomes impossible. That action, reaction and revolt lose their meaning. As there is no more truth, there is no more reality. You feel as if you are tilting at windmills twirling in all directions. You understand that reading, talking or thinking no longer makes sense because you can think everything and its opposite, according to the sources you choose, which are constantly changing. This was the sad situation of many countries in the twentieth century, whose mistakes we hoped not to repeat in the twenty-first: "When everyone constantly lies to you, the result is not that you believe these lies but that no one believes anything any more. A people who can no longer believe anything cannot form opinions. They are deprived not only of their ability to act, but also of their ability to think and judge. And with such a people, you can do whatever you want," said Hannah Arendt. Certainly food for thought.

How one must render unto Caesar what is Caesar's: thanks to Jean-Marc Dupuis and Cristof Modeste.

In support of the above document, we reproduce a commentary on a circular that effectively presents all the characteristics of a totalitarian publication, calling for naming and shaming in schools and the manipulation of children to support it (to denounce their parents). This is an educational initiative worthy of the best days of the Third Reich.

Initially presented on social networks as a circular, this document is in fact described as a "fact sheet" by the ministry. One paragraph in particular drew our attention:

"Children can say things that are blatantly unacceptable", says this three-page text. Referral to the authority of the State for the protection of every citizen must then be invoked without entering into arguments. Parents are to be called in and interviewed by the teacher, if necessary accompanied by a colleague, and the situation reported to the school authorities.

ANNEX 9

BACK TO SCHOOL: DANGERS TO CHILDREN

Excerpts from a blog (reactions from civil society)

"Back to school in France ... *Sit on the cross! Don't step out of the square!*
SHAME on those who support this! Children who are can be barely 3 or 4 years old
don't understand. ... It's enough to traumatize them!
Keep your children safe at home. ...
Soon Covid tests on children will be done at school. ... For sure they'll turn out positive
and they will be vaccinated and RFID-chipped! On that day it will be too late to cry ...
TOO LATE!



ANNEX 10

WARNING: CONTAMINATED SCREENING TESTS

US: WebMD: [Early CDC COVID-19 Test Kits 'Likely Contaminated'](#). 23 June 2020.

UK: *Evening Standard*. [Coronavirus testing kits heading to the UK found to be contaminated with Covid-19](#). 31 March 2020.

UK : *The Sun*: [Testing Times: Thousands of CONTAMINATED Chinese-made coronavirus testing kits are recalled – but some have already been used in US](#). 21 April 2020.

Canada: CBC. [Thousands of contaminated test kits delivered to New Brunswick](#). 16 April 2020.

US: CNBC. [Coronavirus tests were delayed by contamination at CDC lab, report says](#). 18 April 2020.

US: NewsMax. [University of Washington Got Contaminated Tests From China](#). 22 April 2020.

Canada: *The Star*. [Ontario received 100,000 contaminated, unusable swabs for COVID-19 tests](#). 10 April 2020.

UK: *Daily Mail*. [Half a million Covid-19 testing kits from major government supplier are recalled 'after spot checks revealed they were not sterile'](#). 17 July 2020.

UK. [Could Contaminated COVID-19 Tests Help Spread the Virus?](#) 6 April 2020.

Canada: [Le Nouveau-Brunswick a reçu 6400 tests de dépistage inutilisables](#). New Brunswick received 5,400 unusable tests. 17 April 2020.

Radio Canada: [Des milliers d'écouvillons importés de Chine par Québec sont inutilisables](#). (*Millions of testing kits imported from China are unusable. Other provinces also report unusable tests.*) 22 April 2020.

Australia: ABC. [Australia seizes faulty coronavirus protective equipment imported from China](#). The Dutch health ministry announced it had recalled 600,000 face masks on March 28.

ANNEX 11

HEALTH BRIGADES TO COME TO HOMES CONTACT TRACING BY MOBILE PHONE AND SNITCHING

Coronavirus: [A quoi vont ressembler les « brigades sanitaires » pour tracer les patients contaminés ?](#) (*Coronavirus: What are the “health brigades” for tracing contaminated patients going to be like?*)

[Ferez-vous confiance aux brigades sanitaires du déconfinement?](#) (*Will you trust the de-lockdown health brigades?*)

[Déconfinement : plus de "100.000" personnes composeront les brigades sanitaires](#) (*De-lockdown: the health brigades will be composed of over 100,000 people*)

[UK: Council in town with England's highest coronavirus rate set up their OWN contact tracing teams as ministers race to fix nationwide NHS programme after *Lancet* report warned failures in testing would cause a devastating second wave.](#)

[UK: Check in when you go the PUB: NHS re-launches delayed contact tracing app using Google and Apple tech in trials on the Isle of Wight and in east London - as official data shows Test and Trace has got worse again.](#)

[Australia. The Way These Australian Cops Treat This Guy Will Boil Your Blood.](#) 23 July 2020.

[Australia. Australian police going full fascist.](#) 12 May 2020.

[New Zealand locked down for four cases – not hospital admission or deaths.](#) 17 August 2020.

[L'outil de traçage, dernière étape avant le nouveau monde : la dictature mondiale.](#) (*Tracing app: last stage before the new world order: global dictatorship*)

ANNEX 12

ASSAULT ON CIVIL LIBERTIES

[Translator's note: the title and most of the content of Annex 12 consists of references to international law provided by the translator for the target audience.]

PUBLIC FREEDOMS

liberté d'aller et venir constitue une liberté fondamentale

La liberté d'aller et venir, composante de la liberté personnelle protégée par les articles 2 et 4 de la Déclaration des droits de l'homme et du citoyen, constitue une liberté fondamentale

TESTS DE DEPISTAGE

Le dépistage notamment du virus de l'immunodéficience humaine (VIH) n'est obligatoire que dans certains cas (dons de sang, de tissus, de cellules et notamment de sperme et de lait). Dans les autres cas, tout dépistage pour lequel un consentement préalable n'a pas été obtenu est interdit. Aucun dépistage ne peut être fait à l'insu du patient. Un tel dépistage est passible d'un recours pour atteinte à la vie privée. Un dépistage volontaire peut être proposé au patient, dans le respect des règles appelées par la circulaire DGS/DH du 28 octobre 1987, dont celle du libre consentement, après information personnalisée.

Article 36 de l'Ordre national des médecins

Article 36 (article R.4127-36 du code de la santé publique) (commentaires révisés en 2003) :
Le consentement de la personne examinée ou soignée doit être recherché dans tous les cas. Lorsque le malade, en état d'exprimer sa volonté, refuse les investigations ou le traitement proposés, le médecin doit respecter ce refus après avoir informé le malade de ses conséquences. Si le malade est hors d'état d'exprimer sa volonté, le médecin ne peut intervenir sans que ses proches aient été prévenus et informés, sauf urgence ou impossibilité. Les obligations du médecin à l'égard du patient lorsque celui-ci est un mineur ou un majeur protégé sont définies à l'article 42. Le malade a le droit d'accepter ou de refuser ce que le médecin lui propose et non lui impose. Cette liberté du malade est une exigence éthique fondamentale, corollaire du devoir d'information énoncé à l'article précédent. L'information du malade est en effet la condition préalable de son consentement, conséquence qu'il tire de cette information (art. 35).

La loi du 4 mars 2002 précise à cet égard qu'« aucun acte médical ni aucun traitement ne peut être pratiqué sans le consentement libre et éclairé de la personne et ce consentement peut être retiré à tout moment ».

Les actes médicaux justifiant ce consentement doivent être entendus, au sens large : en commençant par l'examen clinique habituel dont certains gestes peuvent être

CODE DE LA SANTE PUBLIQUE

Article L1111-4

Modifié par LOI n°2016-87 du 2 février 2016 - art. 5

Toute personne prend, avec le professionnel de santé et compte tenu des informations et des préconisations qu'il lui fournit, les décisions concernant sa santé.

Toute personne a le droit de refuser ou de ne pas recevoir un traitement. Le suivi du malade reste cependant assuré par le médecin, notamment son accompagnement palliatif.

Le médecin a l'obligation de respecter la volonté de la personne

It is therefore established that no screening test and **no vaccination can be imposed in France.**

The consent of the patient is required in all cases and it cannot be overridden without the health practitioner incurring serious **civil and criminal liability.**

In addition, any **police officer or military personnel** lending support to a forced test or forced vaccination, thus violating Article L-1111-4 of the public Health Code, would

be punishable by penalties defined by article 432-1 of the Criminal Code, which states that **"for a person who is a custodian of public authority acting in the exercise of his duties to take measures to undermine the enforcement of the law is punishable by five years imprisonment** and a 75,000-euro fine."

However, children are not protected as the doctor can override the refusal of parents. But **the consent of a minor** must be systematically sought, and, according to the regulations, the doctor cannot set aside the refusal of the child. He can only override the refusal by the parents.

In addition, this derogation relates to a "treatment" and not to a "medical act" in the broad sense, so it **does not include "testing"** which is in fact excluded from this derogation.

Regarding forced vaccinations, these are not an individual "treatment" but a collective preventative measure and therefore cannot therefore under any circumstances be the object of a derogation based on "a serious risk to the health of the minor", who should be assessed on a case-by-case basis by the attending physician chosen by the parents (invested with parental authority to protect their child by the Civil Code).

CIVIL RIGHTS UNDER INTERNATIONAL LAW

La Déclaration des Droits de l'Homme et du Citoyen, qui figure au « Bloc de Constitutionnalité » et a force supérieure à la Loi de par le Principe de la hiérarchie des normes, commande en son article 2 que la liberté, la propriété, la sûreté et la résistance à l'oppression sont des droits naturels imprescriptibles de l'Homme. The Declaration of the rights of Man and of The Citizen, which is contained in the Article 2 states that freedom, property, security and resistance to oppression are imprescriptible natural rights of man. Universal Declaration of Human Rights

Introduction

The purpose of this section is to provide an overview of the laws or certain of their provisions that are applicable to the present, unprecedented situation in order to give the reader a sense of what protections he or she should benefit from and encourage readers to invoke those rights. Included are laws on:

- Civil and political rights
- Corruption
- Crimes against humanity
- Genocide
- Human rights
- Torture

Readers should check the status of ratification by their country of these conventions, as well as whether their government has notified the United Nations of any derogation from such treaties to impose rule by decree, with the claimed justification of the non-existent “pandemic” to suspend the rights of their populations. Certain international laws, however, do not allow derogation and therefore those rights must remain inviolate.

By virtue of the principle of the hierarchy of legal norms, the international conventions listed below are superior to any statutes, decrees or regulations issued as part of “pandemic” regulations. Even if a decree were to impose a compulsory vaccination, by the principle of the hierarchy of legal norms, this decree would be void as it would have no legal basis.

International law recognizes a set of rules of law whose authority is so strong that it can be imposed on all States. These are often defined as *jus cogens*, or **peremptory norms of general international law. All States are under obligation to respect these rules**, no matter what the conditions are in a country, and whether or not they have signed any international conventions.

Hierarchy of Norms

In the *domestic* legislation of civil and common law States, **a country's constitution has a higher authority than any other law**. Most legal systems admit that ***international law prevails over domestic law*** because governments commit to ensuring that their domestic laws are in conformity with conventions they ratify (which often means they must adapt their national legislation). The key, when faced with implementing or conforming oneself to specific legislation, is to make sure that the law in question is not in contradiction with one that has more authority—that it does not infringe on the exercise of a right or freedom protected by a principle that is superior in the hierarchy of laws.

As an example, the legal sources in decreasing hierarchical order are:

- International treaties and conventions
- The constitution
- Federal law

- Statutes
- Decrees
- Regulations

Derogation

Some human rights treaties allow for the option of a State to *derogate* from some of its obligations during a situation of grave crisis. This applies to the subset of other than so-called non-derogable rights under the UN-level International [Covenant on Civil and Political Rights](#) (ICCPR, see article 4) and two of the regional human rights treaties, the [American Convention on Human Rights](#) (ACHR, see article 27) and the [European Convention on Human Rights](#) (ECHR, see article 15).

Almost twenty States parties to the three treaties mentioned have resorted to derogation during the current COVID-19 epidemic, officially declaring it as a state of emergency threatening the life of the nation and, as a consequence, notifying the United Nations, Organization of American States or Council of Europe about unilaterally derogating from some of their treaty obligations under the three treaties.

Many more States have resorted to domestic emergency powers, either nationally or on a regional or local basis. Such powers typically entail rule by decree, i.e., the executive assuming law-making powers that normally belong to the elected Parliament. In addition to such a power shift, in most cases they also allow deviation from constitutionally protected fundamental rights or some of them.

In light of the risk of abuse, it appears as the safe course of action to insist on the *principle of normalcy*, i.e. to handle the crisis through normally applicable powers and procedures and insist on full compliance with human rights, even if introducing new necessary and proportionate restrictions upon human rights on the basis of a pressing social need created by the pandemic.

The *failure to use* the derogation option ‘risks normalising exceptional powers and permanently recalibrating human rights protections downwards’. If the exigencies of the COVID-19 pandemic require exceptional measures and deviation from some dimensions of the full enjoyment of all human rights, then it is best to introduce those measures through a framework that entails a commitment to legality and to the full restoration of normalcy as soon as possible.

It is useful to note that hardest-hit countries, such as Italy or Spain, have *not* notified about any derogations. This puts into question whether a state of emergency needs to be elevated to the status of the ‘new normal’ through formal notification and derogation, rather than seeking to preserve normalcy, i.e. the ‘old normal’ at least for purposes of international law.

Human rights

The [Universal Declaration of Human Rights](#) (1948)

Everyone has the right to life, liberty and security of person (art. 3). No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment (art. 5). No one shall be subjected to arbitrary interference with his privacy, family, home or correspondence, nor to attacks upon his honour and reputation. Everyone has the right to the protection of the law against such interference or attacks (art.12). Everyone has the right to freedom of movement and residence within the borders of each State (art. 13.1). Everyone has the right to leave any country, including his own, and to return to his country (art. 13.2). The family is the natural and fundamental group unit of society and is entitled to protection by society and the State (art.16.3). No one shall be arbitrarily deprived of his property (art.17.2). Everyone has the right to freedom of

opinion and expression; this right includes freedom to hold opinions without interference and to seek, receive and impart information and ideas through any media and regardless of frontiers (art.19). Everyone has the right to freedom of peaceful assembly and association (art.20.1). No one may be compelled to belong to an association (art.20.2). Everyone has the right to work, to free choice of employment, to just and favourable conditions of work and to protection against unemployment (art.23.1). Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control (art.25.1). Motherhood and childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same social protection (art.25.2). Parents have a prior right to choose the kind of education that shall be given to their children (art.26.2). Everyone is entitled to a social and international order in which the rights and freedoms set forth in this Declaration can be fully realized (art. 28). Nothing in this Declaration may be interpreted as implying for any State, group or person any right to engage in any activity or to perform any act aimed at the destruction of any of the rights and freedoms set forth herein (art. 30).

I have just realised another sneaky that they [Govt] have done.

It puzzled me why the 2004 Civil Contingency Act hadn't been invoked. It was designed to cover 'emergencies'.

This comment from David Davis MP explains why

"putting this in primary legislation rather than secondary takes it out of the purview of the courts., so here we have one of the heaviest-duty Acts we have seen post war prevented from undergoing judicial review in the interests of citizens."

If it had been an amendment, and thus secondary legislation, to the 2004 Act it would have been easier for JR to happen. I presume that the reason that JR cannot be used to challenge primary legislation is because that would set Courts up as alternative legislative bodies, which cannot happen in a 'checks and balances' society. Only Parliament can 'make' law.

Lawyers Kingsley Napley say the following:

The court does not have the power to strike down primary legislation given this has been subject to the full legislative process of Parliament, with the exception of its limited powers to either disapply primary legislation which is incompatible with the European Convention on Human Rights or make a declaration of incompatibility.

This must be the line of attack that Dolan is taking - the ECHR

Office of the High Commissioner for Human Rights (UN Human Rights)

[International Covenant on Civil and Political Rights](#)

[Status of ratification, Reservations and declarations](#)

Article 4

1 . In time of public emergency which threatens the life of the nation and the existence of which is officially proclaimed, the States Parties to the present Covenant may take measures derogating from their obligations under the present Covenant to the extent strictly required by the exigencies of the situation, provided that such measures are not inconsistent with their other obligations under international law and do not involve discrimination solely on the ground of race, colour, sex, language, religion or social origin.

2. No derogation from articles 6, 7, 8 (paragraphs 1 and 2), 11, 15, 16 and 18 may be made under this provision.

Article 6 (no derogation)

1. Every human being has the inherent right to life. This right shall be protected by law. No one shall be arbitrarily deprived of his life.

3. When deprivation of life constitutes the crime of genocide, it is understood that nothing in this article shall authorize any State Party to the present Covenant to

derogate in any way from any obligation assumed under the provisions of the Convention on the Prevention and Punishment of the Crime of Genocide.

Article 7 (no derogation)

No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment. In particular, no one shall be subjected without his free consent to medical or scientific experimentation.

Article 9

1. Everyone has the right to liberty and security of person. No one shall be subjected to arbitrary arrest or detention. No one shall be deprived of his liberty except on such grounds and in accordance with such procedure as are established by law.

Article 10

1. All persons deprived of their liberty shall be treated with humanity and with respect for the inherent dignity of the human person.

Article 12

1. Everyone lawfully within the territory of a State shall, within that territory, have the right to liberty of movement and freedom to choose his residence.

2. Everyone shall be free to leave any country, including his own.

3. The above-mentioned rights shall not be subject to any restrictions except those which are provided by law, are necessary to protect national security, public order (ordre public), public health or morals or the rights and freedoms of others, and are consistent with the other rights recognized in the present Covenant.

4. No one shall be arbitrarily deprived of the right to enter his own country.

Article 13

An alien lawfully in the territory of a State Party to the present Covenant may be expelled therefrom only in pursuance of a decision reached in accordance with law and shall, except where compelling reasons of national security otherwise require, be allowed to submit the reasons against his expulsion and to have his case reviewed by, and be represented for the purpose before, the competent authority or a person or persons especially designated by the competent authority.

Article 17

1. No one shall be subjected to arbitrary or unlawful interference with his privacy, family, home or correspondence, nor to unlawful attacks on his honour and reputation.

2. Everyone has the right to the protection of the law against such interference or attacks.

Article 18 (no derogation)

1. Everyone shall have the right to freedom of thought, conscience and religion. This right shall include freedom to have or to adopt a religion or belief of his choice, and freedom, either individually or in community with others and in public or private, to manifest his religion or belief in worship, observance, practice and teaching.

4. The States Parties to the present Covenant undertake to have respect for the liberty of parents and, when applicable, legal guardians to ensure the religious and moral education of their children in conformity with their own convictions.

Article 19

1. Everyone shall have the right to hold opinions without interference.

2. Everyone shall have the right to freedom of expression; this right shall include freedom to seek, receive and impart information and ideas of all kinds, regardless of frontiers, either orally, in writing or in print, in the form of art, or through any other media of his choice.

3. The exercise of the rights provided for in paragraph 2 of this article carries with it special duties and responsibilities. It may therefore be subject to certain restrictions, but these shall only be such as are provided by law and are necessary:

(a) For respect of the rights or reputations of others;

(b) For the protection of national security or of public order (ordre public), or of public health or morals.

Article 21

The right of peaceful assembly shall be recognized. No restrictions may be placed on the exercise of this right other than those imposed in conformity with the law and which

are necessary in a democratic society in the interests of national security or public safety, public order (ordre public), the protection of public health or morals or the protection of the rights and freedoms of others.

Article 22

1. Everyone shall have the right to freedom of association with others, including the right to form and join trade unions for the protection of his interests.

Article 23

1. The family is the natural and fundamental group unit of society and is entitled to protection by society and the State.

Article 24

1. Every child shall have, without any discrimination as to race, colour, sex, language, religion, national or social origin, property or birth, the right to such measures of protection as are required by his status as a minor, on the part of his family, society and the State.

[United Nations Convention against Corruption \(2005\)](#)

[Signature and Ratification Status](#)

The United Nations Convention against Corruption is the only legally binding universal anti-corruption instrument. The vast majority of United Nations Member States are parties to the Convention.

Article 2. Use of terms

For the purposes of this Convention:

(a) "Public official" shall mean: (i) any person holding a legislative, executive, administrative or judicial office of a State Party, whether appointed or elected, whether permanent or temporary, whether paid or unpaid, irrespective of that person's seniority; (ii) any other person who performs a public function, including for a public agency or public enterprise, or provides a public service, as defined in the domestic law of the State Party and as applied in the pertinent area of law of that State Party; (iii) any other person defined as a "public official" in the domestic law of a State Party. However, for the purpose of some specific measures contained in chapter II of this Convention, "public official" may mean any person who performs a public function or provides a public service as defined in the domestic law of the State Party and as applied in the pertinent area of law of that State Party; ...

(c) "Official of a public international organization" shall mean an international civil servant or any person who is authorized by such an organization to act on behalf of that organization;

Article 8. Codes of conduct for public officials

1. In order to fight corruption, each State Party shall promote, inter alia, integrity, honesty and responsibility among its public officials, in accordance with the fundamental principles of its legal system.

2. In particular, each State Party shall endeavour to apply, within its own institutional and legal systems, codes or standards of conduct for the correct, honourable and proper performance of public functions.

4. Each State Party shall also consider, in accordance with the fundamental principles of its domestic law, establishing measures and systems to facilitate the reporting by public officials of acts of corruption to appropriate authorities, when such acts come to their notice in the performance of their functions.

Article 15. Bribery of national public officials

Article 19. Abuse of functions

Each State Party shall consider adopting such legislative and other measures as may be necessary to establish as a criminal offence, when committed intentionally, the abuse of functions or position, that is, the performance of or failure to perform an act, in violation of laws, by a public official in the discharge of his or her functions, for the purpose of obtaining an undue advantage for himself or herself or for another person or entity.

Article 20. Illicit enrichment

Subject to its constitution and the fundamental principles of its legal system, each State Party shall consider adopting such legislative and other measures as may be necessary to establish as a criminal offence, when committed intentionally, illicit enrichment, that is, a significant increase in the assets of a public official that he or she cannot reasonably explain in relation to his or her lawful income.

Article 52. Prevention and detection of transfers of proceeds of crime

5. Each State Party shall consider establishing, in accordance with its domestic law, effective financial disclosure systems for appropriate public officials and shall provide for appropriate sanctions for non-compliance.

The United Nations [Global Strategy for Women's, Children's and Adolescents' Health \(2016-2030\)](#) has as objectives and targets to “transform”, by expanding enabling environments; to “survive”, by reducing maternal and newborn mortality; and to “thrive” by ensuring

Children and duty of care

The United Nations [Convention on the Rights of the Child](#): States shall “undertake to ensure the child such protection and care as is necessary for his or her well-being” (art. 3), “ensure... the survival and development of the child” (art. 6) and “take appropriate measures to combat disease... taking into consideration the dangers and risks of environmental pollution” (art. 24(c)).

[The Nuremberg Code \(1947\)](#) applies to all experiments on humans, thus including the deployment of 5G with new, higher RF radiation exposure that has not been pre-market tested for safety. “The voluntary consent of the human subject is absolutely essential” (art. 1). Exposure to 5G will be involuntary. “No experiment should be conducted, where there is an a priori reason to believe that death or disabling injury will occur” (art. 5). The findings of over 10,000 scientific studies and the voices of [hundreds of international organizations](#) representing hundreds of thousands of members who have suffered disabling injury and been displaced from their homes by already-existing wireless telecommunications facilities, are “a priori reasons to believe that death or disabling injury will occur”.

Duty to inform and EMFs

The [World Telecommunication Standardization Assembly \(2012\)](#) of the International Telecommunication Union (ITU) stated that “[t]here is a need to inform the public of the potential effects of exposure to electromagnetic fields (EMFs)” and invited Member States “to adopt suitable measures in order to ensure compliance with relevant international recommendations to protect health against the adverse effect of EMF”.

[The Mid-term review of the European Environment and Health Action Plan 2004-2010](#) (2008): “The European Parliament... [n]otes that the limits on exposure to electromagnetic fields which have been set for the general public are obsolete, ... obviously take no account of developments in information and communication technologies, of the recommendations issued by the European Environment Agency or of the stricter emission standards adopted, for example, by Belgium, Italy and Austria, and do not address the issue of vulnerable groups, such as pregnant women, newborn babies and children.”

[Resolution 1815 \(Council of Europe, 2011\)](#): “Take all reasonable measures to reduce exposure to electromagnetic fields, especially to radio frequencies from mobile phones, and particularly the exposure to children and young people.”

Environment

The [Declaration of the United Nations Conference on the Human Environment](#) (1972): “The discharge of toxic substances... in such quantities or concentrations as to exceed the capacity of the environment to render them harmless, must be halted in order to ensure that serious or irreversible damage is not inflicted upon ecosystems” (principle 6).

The [World Charter for Nature](#) (1982): “Activities which are likely to cause irreversible damage to nature shall be avoided... [W]here potential adverse effects are not fully understood, the activities should not proceed” (art. 11).

The [Rio Declaration on Environment and Development](#) (1992): “States have... the responsibility to ensure that activities within their jurisdiction or control do not cause damage to the environment of other States or of areas beyond the limits of national jurisdiction” (principle 2).

The United Nations [World Summit on Sustainable Development](#) (2002): “There is an urgent need to... create more effective national and regional policy responses to environmental threats to human health” (para. 54(k)).

The [African Convention on the Conservation of Nature and Natural Resources](#) (2017): “The Parties shall... take all appropriate measures to prevent, mitigate and eliminate to the maximum extent possible, detrimental effects on the environment, in particular from radioactive, toxic, and other hazardous substances and wastes” (art. 13).
g health and well-being and reducing pollution-related deaths and illnesses.

Space

The [Outer Space Treaty](#) (1967) requires that the use of outer space be conducted “so as to avoid [its] harmful contamination and also adverse changes in the environment of the Earth” (art. IX)

The exploration and use of outer space, including the Moon and other celestial bodies, shall be carried out for the benefit and in the interest of all countries, irrespective of their degree of economic or scientific development, and shall be the province of all mankind.

— [Outer Space Treaty](#) (art. 1)

[The United Nations Guidelines for The Long-Term Sustainability of Outer Space Activities](#) (2018): “States and international intergovernmental organizations should address... risks to people, property, public health and the environment associated with the launch, in-orbit operation and re-entry of space objects” (guideline 2.2(c)).

Liability Convention

[Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment](#), New York, 10 December 1984. [Status](#).

the prohibition of crimes against humanity, similar to the prohibition of genocide, has been considered a peremptory norm of international law, from which no derogation is permitted and which is applicable to all States.

<https://www.un.org/en/genocideprevention/crimes-against-humanity.shtml>

he [1998 Rome Statute establishing the International Criminal Court](#) (Rome Statute) is the document that reflects the latest consensus among the international community on this matter.

[Rome Statute of the International Criminal Court](#)

Article 7

Crimes Against Humanity

1. For the purpose of this Statute, ‘crime against humanity’ means any of the following acts when committed as part of a widespread or systematic attack directed against any civilian population, with knowledge of the attack:
 - a. Murder;
 - b. Extermination;
 - c. Enslavement;
 - d. Deportation or forcible transfer of population;
 - e. Imprisonment or other severe deprivation of physical liberty in violation of fundamental rules of international law;
 - f. Torture;
 - g. Rape, sexual slavery, enforced prostitution, forced pregnancy, enforced sterilization, or any other form of sexual violence of comparable gravity;
 - h. Persecution against any identifiable group or collectivity on political, racial, national, ethnic, cultural, religious, gender as defined in

- paragraph 3, or other grounds that are universally recognized as impermissible under international law, in connection with any act referred to in this paragraph or any crime within the jurisdiction of the Court;
 - i. Enforced disappearance of persons;
 - j. The crime of apartheid;
 - k. Other inhumane acts of a similar character intentionally causing great suffering, or serious injury to body or to mental or physical health.
2. For the purpose of paragraph 1:
 - a. 'Attack directed against any civilian population' means a course of conduct involving the multiple commission of acts referred to in paragraph 1 against any civilian population, pursuant to or in furtherance of a State or organizational policy to commit such attack;

Elements of the crime

According to Article 7 (1) of the [Rome Statute](#), crimes against humanity do not need to be linked to an armed conflict and can also occur in peacetime, similar to the crime of genocide. That same Article provides a definition of the crime that contains the following main elements:

1. A *physical element*, which includes the commission of "any of the following acts":
 - a. Murder;
 - b. Extermination;
 - c. Enslavement;
 - d. Deportation or forcible transfer of population;
 - e. Imprisonment;
 - f. Torture;
 - g. Grave forms of sexual violence;
 - h. Persecution;
 - i. Enforced disappearance of persons;
 - j. The crime of apartheid;
 - k. Other inhumane acts.
2. A *contextual element*: "when committed as part of a widespread or systematic attack directed against any civilian population"; and
3. A *mental element*: "with knowledge of the attack"

The contextual element determines that crimes against humanity involve either large-scale violence in relation to the number of victims or its extension over a broad geographic area (widespread), or a methodical type of violence (systematic). This excludes random, accidental or isolated acts of violence. In addition, Article 7(2)(a) of the [Rome Statute](#) determines that crimes against humanity must be committed in furtherance of a State or organizational policy to commit an attack. The plan or policy does not need to be explicitly stipulated or formally adopted and can, therefore, be inferred from the totality of the circumstances.

In contrast with genocide, crimes against humanity do not need to target a specific group. Instead, the victim of the attack can be any civilian population, regardless of its affiliation or identity. Another important distinction is that in the case of crimes against humanity, it is not necessary to prove that there is an overall specific intent. It suffices for there to be a simple intent to commit any of the acts listed, with the exception of the act of persecution, which requires additional discriminatory intent. The perpetrator must also act with knowledge of the attack against the civilian population and that his/her action is part of that attack.

Genocide <https://www.un.org/en/genocideprevention/genocide.shtml>

Genocide was first recognised as a crime under international law in 1946 by the United Nations General Assembly ([A/RES/96-I](#)). It was codified as an independent crime in the [1948 Convention on the Prevention and Punishment of the Crime of Genocide](#) (the Genocide Convention). The Convention has been ratified by 149 States (as of January 2018). The International Court of Justice (ICJ) has repeatedly stated that the

Convention embodies principles that are part of general customary international law. This means that whether or not States have ratified the Genocide Convention, they are all bound as a matter of law by the principle that genocide is a crime prohibited under international law. The ICJ has also stated that the prohibition of genocide is a peremptory norm of international law (or *ius cogens*) and consequently, no derogation from it is allowed.

Definition

Convention on the Prevention and Punishment of the Crime of Genocide

Article II

In the present Convention, genocide means any of the following acts committed with intent to destroy, in whole or in part, a national, ethnical, racial or religious group, as such:

- a. Killing members of the group;
- b. Causing serious bodily or mental harm to members of the group;
- c. Deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part;
- d. Imposing measures intended to prevent births within the group;
- e. Forcibly transferring children of the group to another group.

Elements of the crime

The Genocide Convention establishes in Article I that the crime of genocide may take place in the context of an armed conflict, international or non-international, but also in the context of a peaceful situation. The latter is less common but still possible. The same article establishes the obligation of the contracting parties to prevent and to punish the crime of genocide.

The popular understanding of what constitutes genocide tends to be broader than the content of the norm under international law. Article II of the Genocide Convention contains a narrow definition of the crime of genocide, which includes two main elements:

1. **A mental element:** the "intent to destroy, in whole or in part, a national, ethnical, racial or religious group, as such"; and
2. **A physical element**, which includes the following five acts, enumerated exhaustively:
 - Killing members of the group
 - Causing serious bodily or mental harm to members of the group
 - Deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part
 - Imposing measures intended to prevent births within the group
 - Forcibly transferring children of the group to another group

The intent is the most difficult element to determine. To constitute genocide, there must be a proven intent on the part of perpetrators to physically destroy a national, ethnical, racial or religious group. Cultural destruction does not suffice, nor does an intention to simply disperse a group. It is this special intent, or *dolus specialis*, that makes the crime of genocide so unique. In addition, case law has associated intent with the existence of a State or organizational plan or policy, even if the definition of genocide in international law does not include that element.

Importantly, the victims of genocide are deliberately targeted - not randomly – because of their real or perceived membership of one of the four groups protected under the Convention (which excludes political groups, for example). This means that the target of destruction must be the group, as such, and not its members as individuals. Genocide can also be committed against only a part of the group, as long as that part is identifiable (including within a geographically limited area) and “substantial.”

Convention on the Rights of Persons with Disabilities and its Optional Protocol 13

December 2006

Article 25

Health

(d) Require health professionals to provide care of the same quality to persons with

disabilities as to others, including on the basis of free and informed consent by, inter alia, raising awareness of the human rights, dignity, autonomy and needs of persons with disabilities through training and the promulgation of ethical standards for public and private health care;

https://en.wikipedia.org/wiki/Nuremberg_Code

However, the Code is considered to be the most important document in the history of clinical research ethics, which had a massive influence on global human rights. The Nuremberg Code and the related Declaration of Helsinki are the basis for the Code of Federal Regulations Title 45 Part 46,^{[13][14]} which are the regulations issued by the United States Department of Health and Human Services for the ethical treatment of human subjects, and are used in Institutional Review Boards (IRBs). In addition, the idea of informed consent has been universally accepted and now constitutes Article 7 of the United Nations' International Covenant on Civil and Political Rights.

- [Nuremberg Code](#)
- [Declaration of Geneva 1948](#)
 - [Rights to Sexual and Reproductive Health - the ICPD and the](#)
- [Convention on the Elimination of All Forms of Discrimination Against Women](#)

United Nations Educational, Scientific and Cultural Organization: Universal Declaration on Bioethics and Human Rights (2005)

The aims of this Declaration are: to promote respect for human dignity and protect human rights, by ensuring respect for the life of human beings, and fundamental freedoms, consistent with international human rights law (art. 2 (c))

Article 3 Human dignity and human rights

1. Human dignity, human rights and fundamental freedoms are to be fully respected.
2. The interests and welfare of the individual should have priority over the sole interest of science or society.

Article 5 Autonomy and individual responsibility

The autonomy of persons to make decisions, while taking responsibility for those decisions and respecting the autonomy of others, is to be respected. For persons who are not capable of exercising autonomy, special measures are to be taken to protect their rights and interests.

Article 6 Consent

1. Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with the prior, free and informed consent of the person concerned, based on adequate information. The consent should, where appropriate, be express and may be withdrawn by the person concerned at any time and for any reason without disadvantage or prejudice.

2. Scientific research should only be carried out with the prior, free, express and informed consent of the person concerned. The information should be adequate, provided in a comprehensible form and should include modalities for withdrawal of consent. Consent may be withdrawn by the person concerned at any time and for any reason without any disadvantage or prejudice. Exceptions to this principle should be made only in accordance with ethical and legal standards adopted by States, consistent with the principles and provisions set out in this Declaration, in particular in Article 27, and international human rights law.

3. In appropriate cases of research carried out on a group of persons or a community, additional agreement of the legal representatives of the group or community concerned may be sought. In no case should a collective community agreement or the consent of a community leader or other authority substitute for an individual's informed consent.

Article 7 Persons without the capacity to consent

In accordance with domestic law, special protection is to be given to persons who do not have the capacity to consent ... Refusal of such persons to take part in research should be respected.

Article 8 Respect for human vulnerability and personal integrity

In applying and advancing scientific knowledge, medical practice and associated technologies, human vulnerability should be taken into account. Individuals and groups of special vulnerability should be protected and the personal integrity of such individuals respected.

Article 9 Privacy and confidentiality

The privacy of the persons concerned and the confidentiality of their personal information should be respected. To the greatest extent possible, such information should not be used or disclosed for purposes other than those for which it was collected or consented to, consistent with international law, in particular international human rights law.

Article 10 Equality, justice and equity

The fundamental equality of all human beings in dignity and rights is to be respected so that they are treated justly and equitably.

Article 11 Non-discrimination and non-stigmatization

No individual or group should be discriminated against or stigmatized on any grounds, in violation of human dignity, human rights and fundamental freedoms.

Article 12 Respect for cultural diversity and pluralism

The importance of cultural diversity and pluralism should be given due regard. However, such considerations are not to be invoked to infringe upon human dignity, human rights and fundamental freedoms, nor upon the principles set out in this Declaration, nor to limit their scope.

Article 13 Solidarity and cooperation

Solidarity among human beings and international cooperation towards that end are to be encouraged.

Article 16 Protecting future generations

The impact of life sciences on future generations, including on their genetic constitution, should be given due regard.

Article 17 Protection of the environment, the biosphere and biodiversity

Due regard is to be given to the interconnection between human beings and other forms of life, to the importance of appropriate access and utilization of biological and genetic resources, to respect for traditional knowledge and to the role of human beings in the protection of the environment, the biosphere and biodiversity.

[Universal Declaration on the Human Genome and Human Rights \(1998\)](#)

[International Declaration on Human Genetic Data \(2003\)](#)

Council for International Organizations of Medical Sciences [International Ethical Guidelines for Health-related Research Involving Humans](#) (2016)

Guideline 1: Scientific and social value and respect for rights

Guideline 2: Research conducted in low-resource settings

Guideline 3: Equitable distribution of benefits and burdens In the selection of individuals and groups of participants in research

Guideline 4: Potential individual benefits and risks of research

Guideline 5: Choice of control in clinical trials

Guideline 6: Caring for participants' health needs

Guideline 7: Community engagement

Guideline 8: Collaborative partnership and capacity-building For research and research review

Guideline 9: Individuals capable of giving informed consent

Guideline 10: Modifications and waivers of informed consent

Guideline 11: Collection, storage and use of biological materials and related data

Guideline 12: Collection, storage and use of data in health-related research

Guideline 13: Reimbursement and compensation for research participants

Guideline 14: Treatment and compensation for research-related harms

Guideline 15: Research involving vulnerable persons and groups

Guideline 16: Research involving adults incapable of giving informed consent

- Guideline 17: Research involving children and adolescents
- Guideline 18: Women as research participants
- Guideline 19: Pregnant and breastfeeding women as research participants
- Guideline 20: Research in disasters and disease outbreaks
- Guideline 21: Cluster randomized trials
- Guideline 22: Use of data obtained from the online environment and digital tools in health-related research
- Guideline 23: Requirements for establishing research ethics committees and for their review of protocols
- Guideline 24: Public accountability for health-related research
- Guideline 25: Conflicts of interest
- Appendix 2 Obtaining informed consent: essential information for prospective research participants

World Medical Association Declaration Of Helsinki- Ethical Principles for Medical Research Involving Human Subjects (2013)

The Declaration is morally binding on physicians, and that obligation overrides any national or local laws or regulations, if the Declaration provides for a higher standard of protection of humans than the latter. Investigators still have to abide by local legislation but will be held to the higher standard.

The fundamental principle is respect for the individual (art. 8), their right to self-determination and the right to make **informed decisions** (arts. 20, 21 and 22) regarding participation in research, both initially and during the course of the research. The investigator's duty is solely to the patient (arts. 2, 3 and 10) or volunteer (arts. 16, 18), and while there is always a need for research (art. 6), the subject's welfare must always take precedence over the interests of science and society (art. 5), and ethical considerations must always take precedence over laws and regulations (art. 9).

The recognition of the increased vulnerability of individuals and groups calls for special vigilance (art. 8). It is recognized that when the research participant is incompetent, physically or mentally incapable of giving consent, or is a minor (arts. 23, 24), then allowance should be considered for surrogate consent by an individual acting in the subject's best interest, although their consent should still be obtained if at all possible (art. 25).

[1] For example, William Schabas, *Unimaginable Atrocities – Justice, Politics, and Rights at the War Crimes Tribunals*, Oxford University Press, 2012 – p. 51-53.

[2] For example, M. Cherif Bassiouni, *Crimes Against Humanity in International Criminal Law*, Martinus Nijhoff Publishers, 1999, p.62

ANNEX 13

SYMPTOMS REPORTED BY ELECTROHYPERSENSITIVE (EHS) PATIENTS – FIRST-YEAR SUMMARY FROM A SPECIALIZED PAIN RESEARCH CLINIC *[Supplementary information added by the translator]*

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Background: Electromagnetic radiation (EMR) is the **fastest growing environmental pollutant**

In Sweden, Electrohypersensitivity ("Microwave Sickness") is recognized as a handicap

Incidence of EHS is 3-11% and **rising with rise in exposure to EMR**

In Israel, EHS patients are disbelieved. They are considered either psychiatric, or suffering from "nocebo" effect

Methods: *Case series descriptive summary*

- The Electromagnetic Radiation Research Clinic was opened in 7/2018, following patient demand
- Operates once monthly, three 2-hour meetings
- Meeting includes: physical examination, thorough medical history including review of susceptibilities, medical symptoms, EMR exposure assessment and medical test results

Demographics:

- 9 male, 10 female
- Age range: 9-75, median age: 44
- Patient professions: technician, economist, accountant, teacher, artist, social worker, child carer, pupil etc.

Results:

Patient characteristics	No. of patients	% of patients
Diagnosed with Fibromyalgia	5	26%
S/p exposure to air pollution	8	42%
S/p spine or head trauma	5	26%
Returned to clinic for follow-up visit	6	32%
EMR frequencies distribution:		
Sensitivity only to high frequency (RF/MW)	4	21%
Sensitivity only to low frequency (ELF)	1	5%
Sensitivity to all EMR frequencies	13	68%
Unclear diagnosis: similar hypersensitivity symptoms, but not to specific EMR freq	1	5%

Patient outcomes	No. of patients	% of patients
Avoided exposure & reduced or stopped use of devices that emit EMF	18	95%
Took sick leave from work (or school)	15	79%
Quit workplace	13	68%
Workplace accommodated so that the patient could stay	6	32%
Left their home to avoid exposure	7	37%

Reported Symptoms	No. of patients	% of patients
Neurologic		
Headache / migraine	17	89%
"Brain fog"	14	74%
Sleep difficulties	13	68%
Anxiety	17	89%
Fatigue/weakness	17	89%
Dizziness	7	37%
Nausea	5	26%
Absence-like "blackouts"	2	10.5%
Earache / tinnitus	6	32%
Muscle tingling / twitching	9	47%
Abdominal cramps	6	32%
Heightened sensitivity to noise/ light	9	47%
Changes in electrical conductance	4	21%
Other neurologic symptoms	16	84%
Other short-term symptoms		
Palpitations	8	42%
"Chest tightness"	11	58%
Shortness of breath	4	21%
Joint/ tendon/ muscle pain	11	58%
Skin sensations / rash	13	68%
Intermittent sensation of "internal burning"	5	26%
Long-term symptoms		
Hand / leg dysfunction	8	42%
Edema	4	21%
Immune problems	9	47%
Lymph node swelling	3	16%

Conclusions:

- EHS patients in Israel are not recognized by the Medical community
- Many patients suffer severe debilitating physical symptoms
- A wide variety of neurologic and non-neurologic symptoms
- Symptoms tend to appear in each patient's weak/ vulnerable organs (head, neck, back, legs, abdomen, etc)
- Each patient's specific symptoms are consistent, reappearing each time he/she is exposed to EMR
- Severe outcomes: some of these patients end up losing their workplace, their livelihood or even their home

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ANNEX 14

SUPPLEMENTARY REFERENCES ADDED BY THE TRANSLATOR

These links to documents, articles, books and videos are intended to supplement the information provided in the present document and to provide an opportunity for readers to do their own further research.

Switch it all off!

The Illuminati uses television to control your mind
TV Lobotomie - La vérité scientifique sur les effets de la télévision
Never Watch The Television
Is Technology Controlling Your Mind? | Steven Hassan | TEDxBeaconStreetSalon
David Icke & Stewart Swerdlow mind control thought police
Microwaves, Society and Food
Electron Cyclotron Resonance Bioweapons
Life says -- "no thanks"
The Madness of Putting 53,000 5G Satellites in Space (now we are facing up to 100K)
Resonance (2012) Beings of frequency (documentary)
Generation Zapped – Trailer (documentary)
'Smash-your-mobile-phone" campaign, reaction to telemóveis, Conan Osiris, Portugal
Dr. Dietrich Klinghardt - What's really going on in the world?
Wireless wake-up call | Jeromy Johnson | TEDxBerkeley

Unplugging

Wireless Education – courses on how to unplug and be safer

The goal of this exercise is to stop using wifi which is harmful to you and all living things.

There are a number of these how-to videos on youtube. So far it looks like you can only do this with Apple devices but please correct me if this is wrong. Of course, you have to have internet coming to a modem, but most people have wireless coming from their nbn or adsl modem, and most people don't know how to change this situation as there is generally no technical help that comes with an nbn connection. But you CAN use a portable Apple device (smartphone, tablet or iPad) without wireless if you get hold of the right gizmos!

Perhaps some teck wizz people out there can do this with their eyes closed, but this explanation is for those of us who feel scrambled by technology. In fact I watched three videos just to get the hang of it.

How to connect your ipod, ipad or iphone to the Ethernet - 3 minutes

https://www.youtube.com/watch?time_continue=111&v=cWqbpfhcMWc

This guy shows you the adapters easily but not their names also he does not mention plugging anything into your router or modem.

I dont have a portable device, but many people might find this very useful so please share and help save the environment so the birds and the bees, your pets, your neighbours and yourself do not need to suffer unnecessarily for your why fry convenience

Here is another one just after that one

Internet on iPad using ethernet cable - now with power in new easy method - no

wifi or mobile data!

<https://www.youtube.com/watch?v=oBKs2tPggVI> 3 min 41

It says you have to get genuine Apple parts or it may not work (see screen shot)

- what you need
- 1) the new lightning to usb3 camera kit
 - 2) usb to internet adapter from Apple (there are fakes on Amazon)
 - 3) the power supply which came with the iPad
 - 4) power supply (cradle for item 3) to wall plug
 - 5) internet connection coming from your router or modem

For greater length you can use an extension cable for the power, or you can use a high quality extension cord "lightning to usb" - [*lightning is the name of the very small plug that fits into your portable device.*] if necessary, plus a 3m usb extension cable with a usb plug on both ends.

If you still can't believe it here is another one:

Connecting an iPad to a Wired Network with an Ethernet Cable

<https://www.youtube.com/watch?v=rF1-p796upU> 5 min 25

this third video is very thorough and not too fast. It names the connectors

1) the "lightning to usb3" adapter has a slot for providing power to the ethernet adapter (below, 2) as well as a usb slot on one end of it, and a lightning plug on the other end. You put the lightning plug end into your iPad or tablet slot. You stick a lightning plug into the small slot and on the other end it is plugged into power. It powers and also charges the iPad simultaneously. Into the usb slot goes 2) below

2) the "usb ethernet adapter" from Apple, it has a usb plug on one end and an ethernet slot on the other end. So the usb plug goes into the usb slot on 1)

3) plug the ethernet cable from the modem or router into 2) above

4) make sure the wifi is turned off, bluetooth off or for other device use aeroplane mode.

That takes just 3 minutes, he then performs a speed test to show how well it is working. If you want to add a manual keyboard to avoid touching your iPad screen, you can get a usb ethernet adapter 2) with more usb slots in the side of it, (see video) but I am not sure whether this is an Apple device or not. This helps reduce radiation going into your fingers.

The "Covid" psyop

[Alice in Wonderland Technique: The Power of Applied Confusion](#)

[Alice in Wonderland: The Power of Applied Confusion](#), chapter starting on page 129 of a manual entitled, 'EDUCING INFORMATION – Interrogation: Science and Art', published by the National Defense Intelligence College in 2006, citing a 1963 torture manual entitled, "[KUBARK Counterintelligence Interrogation Manual, Human Resource Exploitation Training Manual](#)," based on CIA research, much of it conducted through the MK ULTRA program but some of it going all the way back to the 1350s, to the work of Nicholas Eymerich, Inquisitor General of Aragon, Spain.

[How To Escape The Karpman Drama Triangle](#)

640 doctors, cv19 is a global scam. "We have a lot of evidence that it is a fake story all over the world." 6 August 2020.

German COVID-19 Extra-Parliamentary Inquiry Committee and the demolition of the 'Covid' narrative.

Germany: Extra-parliamentary Doctors' Corona Investigation Commission ACU20

"Covid"

Plandemic Documentary Series

Understanding the COVID-19 "CASEDEMIC"

Die Zerstörung des Corona Hypes (German - Destroying the Corona hype)

"Covid" and electromagnetic radiation

Video: Electricity and flu connection may explain "viruses"

The Under-Reported Role of Toxic Substance Exposures in the COVID-19 Pandemic

Ronald N.Kostoff, Michael B.Briggs, Alan L.Porter, Antonio F. Hernández, Mohammad Abdollahi, Michael Aschner, AristidisTsatsakis

Electromagnetic Radiation Due to Cellular, Wi-Fi and Bluetooth Technologies: How Safe Are We? Naren, A. Elhence, V. Chamola and M. Guizani, [Electromagnetic Radiation Due to Cellular, Wi-Fi and Bluetooth Technologies: How Safe Are We?](#), in *IEEE Access*, vol. 8, pp. 42980-43000, 2020, doi: 10.1109/ACCESS.2020.2976434. [Retracted (i.e. too embarrassing for the telecommunications industry)]

Report of the Independent Expert Group on Mobile Phones (IEGMP), chaired by Sir William Stewart (The Stewart Report, 2000)

Book: *Dirty Electricity: Electrification and the Diseases of Civilization*, 6 Dec. 2012 by MD Samuel Milham

5G Radiation - Potential Cause of Covid-19 Pandemic

Irregularities vs. FCC: Exposing and prosecuting a vast, illegal financial scandal behind 5G

Salmen, S. H., Alharbi, S. A., Faden, A. A., & Wainwright, M. (2018). [Evaluation of effect of high frequency electromagnetic field on growth and antibiotic sensitivity of bacteria](#). *Saudi journal of biological sciences*, 25(1), 105–110. <https://doi.org/10.1016/j.sjbs.2017.07.006>

Correlation between the potential electromagnetic pollution level and the danger of Covid-19. [Translator's note: the subtitle to this paper seems to have been mistranslated as it is not consistent with the arguments made in the paper.] Vladimir I. Mordachev. Belarusian State University of Informatics and Radioelectronics (Minsk, Republic of Belarus). 15 June 2020:

Conclusion: "The validity of the hypothesis about the possible impact of the EM background created by the public wireless information systems, first of all by systems of cellular (mobile) communications, on the relative lethality rate from COVID-19 is indirectly confirmed by the results of the analysis of correlation between the degree of severity of hygienic regulation of levels of radio frequency EM background for the population in different countries according to data [12] and the lethality rate from COVID-19 in relation to the number of people infected according to [38–40]."

Study of the correlation between cases of coronavirus and the presence of 5G networks. Bartomeu Payeras i Cifre. March-April 2020

Stein, Yael. (2020). [Symptoms reported by Electrohypersensitive \(EHS\) patients – first-year summary from a specialized Pain Research Clinic](#) DOI: 10.13140/RG.2.2.33185.02400.

Depopulation

Silent Weapons for Quiet Wars

TED 2010: Bill Gates: Innovating to Zero!

Anthropogenic Climate Change

Surprise, K. (2020). [Stratospheric imperialism: Liberalism, \(eco\)modernization, and ideologies of solar geoengineering research](#). *Environment and Planning E: Nature and Space*, 3(1), 141–163. <https://doi.org/10.1177/2514848619844771>
[NASA's Van Allen Probes Spot Man-Made Barrier Shrouding Earth](#). May 17, 2017. [Geoengineering Watch](https://www.geoengineeringwatch.org/). <https://www.geoengineeringwatch.org/>
[Zero Geoengineering](https://zerogeoengineering.com/). <https://zerogeoengineering.com/>

Weather as a weapon

[Weather Weapons are Real, They Have a Treaty to Regulate them](#) [HAARP]. 15 October 2016.

[Convention on the Prohibition of Military or Any Other Hostile Use of Environmental Modification Techniques](#). New York, 10 December 1976. Art. 1: Each State Party to this Convention undertakes not to engage in military or any other hostile use of environmental modification techniques having widespread, long-lasting or severe effects as the means of destruction, damage or injury to any other State Party. [Status](#)

Governments are corporations

[UK Common law—A lawful rebellion](#)

[Governments are corporations](#)

[The “Corporate Coup d’État”](#)

[Robert F Kennedy Jr. - Corporatism is using vaccines to turn Americans into commodities](#)

[How authoritarianism has spread since the coronavirus pandemic began](#)

[PLANDEMIC: COVID-19 and the Corporate Coup d’État](#)

Lawful rebellion

[Legal Name Fraud: The Truth](#)

[Judge Anna von Reitz](#)

[New Chartist Movement](#)

[Book: Truth Teller's Shield: A Manual for Whistle Blowers & Hell Raisers: The Theory & Practice of Letting Your Truth & The Truth Prevail](#) 2 Sept. 2016, by Kevin Annett

[Rebirth and Resistance: An Easter Message of Hope from Kevin Annett](#)

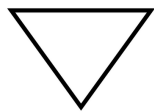
[Strawman Explained - Legal Fiction Documentary - Common Law and Sovereignty](#)

[Lawful Rebellion for a peaceful future: “It’s an illusion” talk at St.Annes, Lancashire](#)

[The People’s United Community](#)

[UNITY = The rise of the 99%](#)

UNITY



[Book: Meet Your Strawman: And Whatever You Want To Know](#) by David E. Robinson

[Book: The UCC Connection: How To Free Yourself From Legal Tyranny](#) by David E. Robinson

[Book: Establishing the Reign of Natural Liberty: A Common Law Training Manual](#) by Kevin Annett

[Book: Disclosure 101: What You Need To Know](#), 1 July 2014 by David E. Robinson and Anna von Reitz

[Mark Passio - Natural Law Seminar - New Haven, CT](#)

[Magna Carta 2020: The restoration of common law](#)

[The Excellence of the Common Law -- with Brent Allan Winters](#)

[The Anatomy of Slavespeak](#)

Money system

[Video: Michael Rivero: All Wars Are Bankers' Wars](#)

[The Secret of Oz](#)

[New Scientist: Revealed – the capitalist network that runs the world](#)

Surveillance

[Shadowgate](#). The film details Interactive Internet Activities (IIA) and the military psychological warfare weapon, Shadownet, which is used to control the public narrative through the Fake News, to fix elections, to organize the BLM riots among other things.

Vaccines

Dr. Jerry Day - [Mandated Vaccinations, Get ready to say "NO!"](#)

Jerry Day has created a notice-of-liability to give to anyone who tries to force vaccines on you. Even though they refuse to sign, that shows they have been informed that vaccines can cause damage. He offers a second document that lists the reasons individuals have the right to reject vaccines. He says the documents act as an insurance policy if anything goes wrong with a forced vaccine, because it is proof of your objection to the vaccination and, thereby, makes the administrators of the vaccine personally subject to penalty and prosecution. In other words, If you do not object and make your position clear, you may be presumed to agree with unconstitutional laws and harmful public policy. [Freedom-taker](#) website (download documents to protect your freedom)

[Contract form for ensuring that you are not administered the vaccine](#)

Print it out and read it carefully

Book: [Anyone Who Tells You Vaccines Are Safe and Effective is Lying](#) by Dr. Vernon Coleman

[Plandemic II: Indoctrination](#)

[5G / Coronavirus Briefing 28 April 2020](#) See section on vaccinations and appendix 1.

Two documents to help prevent forced vaccinations.